



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

TO: Manor Court of Rochelle; Project #17-035
Project File

FROM: Courtney Avery

RE: Support Signatures

DATE: October 17, 2017

This memo is to document receipt of 222 signatures (Attachment A) in support of Manor Court of Rochelle; Project #17-035.

It should be noted that Attachment A was accepted by Jeannie Mitchell, General Counsel for the Illinois Health Facilities and Services Review Board (HFSRB) during the Manor Court of Rochelle public hearing held on Thursday, October 12, 2017. HFSRB staff can not verify if any of the individuals were physically present during the public hearing or when the signatures were obtained.

Attachment

Liberty Village of Rochelle

We the undersigned support the new construction of Liberty Village of Rochelle, a 92 bed skilled nursing care facility. This facility will provide Rochelle and surrounding area residents with state of the art Bounce Back rehabilitation services, memory/Alzheimer's care and long term nursing care.

	Name	City
1	Diana Rusk	Rochelle
2	Sam Banta	Rochelle
3	Deonette Davis	Rochelle
4	Maylene Stencking	Rochelle
5	Joan Sam	Rochelle
6	Phyllis	Rochelle
7	Willy Jackson	Chana
8	Mike Thake	Rochelle
9	Jennifer Simmons	Rochelle
10	Bobie Craven	Rochelle
11	Krista Temple	Rochelle, IL
12	Alan Hurl	Rochelle, IL
13	Alan Miller	Rochelle, IL
14	Green Torrance	Rochelle
15	LePatricia S. Gurd	Rochelle
16	Kayla Gati	Rochelle
17	Adelia Har	Rochelle
18	Sam Thinsford	Rochelle
19	Kim Montgomery	Rochelle, IL
20	John F. Spartz	Rochelle, IL
21	Charles King	Rockton, IL
22	Charles King	Rockton, IL
23	Bethel Andrew	Rochelle
24	Janice Shaffer	Rochelle, IL
25	Wanda Gindash	Rochelle, IL
26	Charlotte S. Swanson	Rockton, IL
27	Charlotte S. Swanson	"
28	Myra S. Swanson	"
29	Myra S. Swanson	"
30	Myra S. Swanson	"
31	Maria R. Lora	Rochelle
32	Lino Lora	Rochelle
33	Marjorie R. Lora	Rochelle
34	Marjorie R. Lora	Rochelle
35	Marjorie R. Lora	Rochelle
36	Marjorie R. Lora	Rochelle
37	Marjorie R. Lora	Rochelle
38	Marjorie R. Lora	Rochelle
39	Marjorie R. Lora	Rochelle
40	Marjorie R. Lora	Rochelle
41	Marjorie R. Lora	Rochelle
42	Marjorie R. Lora	Rochelle (Hillcrest)
43	Marjorie R. Lora	Rochelle
44	Marjorie R. Lora	Rochelle
45	Marjorie R. Lora	Rochelle
46	Marjorie R. Lora	Rochelle
47	Marjorie R. Lora	Rochelle
48	Marjorie R. Lora	Steward
49	Marjorie R. Lora	Rochelle
50	Marjorie R. Lora	Rochelle

Thank you for your help!

Liberty Village of Rochelle

We the undersigned support the new construction of Liberty Village of Rochelle, a 92 bed skilled nursing care facility. This facility will provide Rochelle and surrounding area residents with state of the art Bounce Back rehabilitation services, memory/Alzheimer's care and long term nursing care.

	Name	City
1	John Labratan	Rochelle, IL
2	Esther Raffle	Rochelle, IL
3	Sam Kambayya	Rockford, IL
4	Karen D. Collier	Rochelle, IL
5	Mary Clark	Rochelle, IL
6	Karen McDonald	Rochelle, IL
7	Norma Larsen	Rochelle, IL
8	Josh Lewis	Rochelle, IL
9	Sonya Swanson	Davis Junction, IL
10	Paul Erickson	Rochelle, IL
11	Charles Wagner	Rochelle, IL
12	Bethel Andrew	Rochelle, IL
13	Margaret Smith	Steward, IL
14	Betty Egan	Rochelle, IL
15	Monty Alford	Claremore, OK
16	Ray O'Leary	Richfield, IL
17	Margaret Olson	Rochelle, IL
18	Edna Clapp	Rochelle, IL
19	Mr. Clapp	Rochelle, IL
20	Mitchell Montgomery	Rochelle, IL
21	James E. DeJames	Rochelle, IL
22	Nancy Carr	Davis Junction, IL
23	Harold C. Miller	Rochelle, IL
24	Donna Patton	Rochelle, IL
25	Nancy Brown	Rochelle, IL
26	Judy Madsen	Rochelle, IL
27	Bob F. Fink	Rochelle, IL
28	Wally Fink	Rochelle, IL
29	Wally Fink	Rochelle, IL
30	Wally Fink	Rochelle, IL
31	Wally Fink	Rochelle, IL
32	Wally Fink	Rochelle, IL
33	Wally Fink	Rochelle, IL
34	Wally Fink	Rochelle, IL
35	Wally Fink	Rochelle, IL
36	Wally Fink	Rochelle, IL
37	Wally Fink	Rochelle, IL
38	Wally Fink	Rochelle, IL
39	Wally Fink	Rochelle, IL
40	Wally Fink	Rochelle, IL
41	Wally Fink	Rochelle, IL
42	Wally Fink	Rochelle, IL
43	Wally Fink	Rochelle, IL
44	Wally Fink	Rochelle, IL
45	Wally Fink	Rochelle, IL
46	Wally Fink	Rochelle, IL
47	Wally Fink	Rochelle, IL
48	Wally Fink	Rochelle, IL
49	Wally Fink	Rochelle, IL
50	Wally Fink	Rochelle, IL

Thank you for your help!

Liberty Village of Rochelle

We the undersigned support the new construction of Liberty Village of Rochelle, a 92 bed skilled nursing care facility. This facility will provide Rochelle and surrounding area residents with state of the art Bounce Back rehabilitation services, memory/Alzheimer's care and long term nursing care.

	Name	City
1	MARK BATTY	Rochelle
2	Kim Lewis	Rochelle
3	Paul Valdes	Rochelle
4	Royal Undergarden	Rochelle
5	Paul Valdes	Rochelle
6	Paul Valdes	Rochelle
7	Tracy Richardson	Rochelle
8	Robert Marlin	Rochelle
9	Paul Valdes	Rochelle
10	Thayne Kennedy-Edes	Rochelle
11	Jacqui Bragg	Rochelle
12	Laura Cirone	Rochelle
13	Paul Valdes	Rochelle
14	John Robb	Stillman Valley
15	Mark Damascus	Rochelle
16	Trey Worley	Rochelle
17	Stefanie Roberts	Homewood
18	Paul Abbott	Rochelle
19	Wally Erickson	Ashton, IL
20	Carolee Bernhardt	Rochelle, IL
21	Garet Stewart	Rochelle
22	Eric Jack	Rochelle
23	Judy Ramer	Rochelle
24	John Norem	Rochelle
25	Linda R. Daub	Chana, IL
26	David Wagner	Rochelle, IL
27	ELIZABETH GARDNER	OREGON IL
28	MARY SAGE	Rochelle, IL
29	Jack A.	Howard, IL
30	Kath Polak	Rochelle, IL
31	Kellie Musselman	Greenwood, IL
32	Cathy Hill	Ashton, IL
33	Kenneth Jellie	Rochelle, IL
34	Robert Schell	Rochelle, IL
35	Sharon Fore	Franklin Grove, IL
36	Paul M. Ziegler	Rochelle, IL
37	Connie Christensen	Rochelle, IL
38	Ausie Kreider	Rochelle, IL
39	Debbie Amaraquist	Ashton, IL
40	Heather B.	Rochelle, IL
41	Wesley Rogers	Ashton, IL
42	Sharon J. Bond	Oregon, IL
43	Ryan And	Rochelle
44	Robert H.	Rochelle, IL
45	Kara Vanthuse	Rochelle, IL
46	Donna Trout	La Moille, IL
47	Judy B.	Rochelle, IL
48	Evan Tracy	Rochelle, IL
49	Amala B.	Rochelle, IL
50	Ken Thvestad	Chana, IL

Thank you for your help!

Liberty Village of Rochelle

We the undersigned support the new construction of Liberty Village of Rochelle, a 92 bed skilled nursing care facility. This facility will provide Rochelle and surrounding area residents with state of the art Bounce Back rehabilitation services, memory/Alzheimer's care and long term nursing care.

	Name	City
1	Robert J. Gurt	Rochelle
2	David R. Gurt	Rochelle, IL
3	Dennis L. Wise	Rochelle, IL
4	Charles L. Ficker	Rochelle, IL
5	Randy W. Wenzel	OREGON IL
6	Brian L. Wenzel	Rochelle, IL
7	Arnold L. Wenzel	Kings IL
8	Michael L. Wenzel	Millman Valley, IL
9	Debra L. Wenzel	Rochelle, IL
10	Robert L. Wenzel	Oregon IL
11	Robert L. Wenzel	Julia Junction, IL
12	Robert L. Wenzel	Rochelle, IL
13	Robert L. Wenzel	Rochelle, IL
14	Robert L. Wenzel	Rochelle, IL
15	Robert L. Wenzel	Rochelle, IL
16	Robert L. Wenzel	Steward, IL
17	Robert L. Wenzel	Rochelle, IL
18	Robert L. Wenzel	Steward, IL
19	Robert L. Wenzel	Rochelle, IL
20	Robert L. Wenzel	Rochelle, IL
21	Robert L. Wenzel	Rochelle, IL
22	Robert L. Wenzel	STEWART
23	Robert L. Wenzel	Rochelle
24	Robert L. Wenzel	Rochelle
25	Robert L. Wenzel	Rochelle
26	Robert L. Wenzel	Rochelle
27	Robert L. Wenzel	Rochelle
28	Robert L. Wenzel	Rochelle
29	Robert L. Wenzel	Rochelle
30	Robert L. Wenzel	Rochelle
31	Robert L. Wenzel	Rochelle, IL
32	Robert L. Wenzel	Rochelle, IL
33	Robert L. Wenzel	Rochelle, IL
34	Robert L. Wenzel	Rochelle, IL
35	Robert L. Wenzel	Rochelle, IL
36	Robert L. Wenzel	Rochelle, IL
37	Robert L. Wenzel	Rochelle, IL
38	Robert L. Wenzel	Rochelle, IL
39	Robert L. Wenzel	Rochelle, IL
40	Robert L. Wenzel	Rochelle, IL
41	Robert L. Wenzel	Rochelle, IL
42	Robert L. Wenzel	Rochelle, IL
43	Robert L. Wenzel	Rochelle, IL
44	Robert L. Wenzel	Rochelle, IL
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47	Robert L. Wenzel	Rochelle, IL
48	Robert L. Wenzel	Rochelle, IL
49	Robert L. Wenzel	Rochelle, IL
50	Robert L. Wenzel	Rochelle, IL

Thank you for your help!

2

Liberty Village of Rochelle

We the undersigned support the new construction of Liberty Village of Rochelle, a 92 bed skilled nursing care facility. This facility will provide Rochelle and surrounding area residents with state of the art Bounce Back rehabilitation services, memory/Alzheimer's care and long term nursing care.

Name	City
1. [Signature]	Rochelle, IL
2. [Signature]	Rochelle, IL
3. [Signature]	Rochelle, IL
4. [Signature]	Rochelle, IL
5. [Signature]	Amberg
6. [Signature]	Amberg
7. [Signature]	Rochelle, IL
8. [Signature]	Rochelle, IL
9. [Signature]	Wheaton
10. [Signature]	Rochelle, IL
11. [Signature]	Holcomb
12. [Signature]	Rochelle, IL
13. [Signature]	Rochelle, IL
14. [Signature]	Rochelle, IL
15. [Signature]	Rochelle, IL
16. [Signature]	Rochelle, IL
17. [Signature]	Rochelle, IL
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19. [Signature]	Rochelle, IL
20. [Signature]	Rochelle, IL
21. [Signature]	Rochelle, IL
22. [Signature]	Rochelle, IL
23. [Signature]	Rochelle, IL
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Thank you for your help!

Liberty Village of Rochelle

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	Name	City
1	John C. Henge	Rockelle
2	Joanne L. Henge	Rockelle
3	Barbara Tomanel	Rockelle
4	Mary Feldhaus	Rockelle
5	Myronia B. Hays	Rockelle
6	Lucia Madgen	Rockelle
7	Barbara Bartha	Rockelle
8	Arnold Stangeland	Lee
9	Alfred Stangeland	Lee
10	Carolyn R. Cryer	Rockelle
11	Bernice Fryer	Rockelle
12	Hugh Fryer	Rockelle
13	Shirley Murphy	Rockelle
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Liberty Village of Rochelle

We the undersigned support the new construction of Liberty Village of Rochelle, a 92 bed skilled nursing care facility. This facility will provide Rochelle and surrounding area residents with state of the art Bounce Back rehabilitation services, memory/Alzheimer's care and long term nursing care.

	Name	City
1	Maria Deutsch	Rochelle
2	Betha Ock	Rochelle
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Thank you for your help!



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

**HEALTH FACILITIES and SERVICES REVIEW BOARD
PUBLIC HEARING REPORT**

Manor Court of Rochelle, Rochelle

Project #17-035

October 12, 2017

Spring Lake Marina

121 South 8th Street

Rochelle, Illinois

11AM – 2PM

HFSRB Staff Present	Courtney Avery, Administrator; Jeannie Mitchell, General Counsel and Ann Guild, Compliance Manager
Board Member Present	Brad Burzynski
Registered Appearance	Support 41 Oppose 20 (Total 61)
Registered Testimony	Support 24 Oppose 04 (Total 28)
Total Attendance	89
Report Author	Courtney Avery, Administrator



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print) Ken Griffith

City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

concerned citizen

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print) Leroy A Shornaker

City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print)

Tom Byro

City

CRESTON

State

ILL.

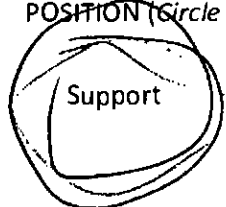
Zip

60113

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (Circle appropriate position)



Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print) Margaret Charboneau

City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Concerned Citizens

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print)

RON SASSAMAN

City

ROCHELLE

State

IL

Zip

61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print)

YVONNE COLVILLE

City

ROCHELLE

State

IL

Zip

61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

CONCERNED CITIZEN

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print)

Tom Van Hise

City

Rochelle

State

IL

Zip

61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Concerned Citizen

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print)

Norma Thiele

City

Rochelle

State

IL.

Zip

61068

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III.

POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print) Carol M. Elliott

City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17

Don Hillis KN Oppose

Whitehurst Oppose

Cheri McGuire I am for this facility - support

Nancy Russell I am in support of this facility.

REGISTRATION
PLEASE PROVIDE NAME, ADDRESS
AND SUPPORT, OPPOSE, OR NEUTRAL

Barb Reineck	Support	Juanita Osborne ^{Support}
Sue Kefken	Support	Mary Johnson support
Terri Frydy	Support	Carol Elliott support
Robert Elliott	Support	RON + LYNDIA SASSAMAN SUPPORT
R.D. Wain	- Oppose	Yvonne Collette support
Susan Shaw	- Oppose	Diane McWally support
Synette McJade	- Oppose	Norm Jenkins Support
Michael Fawble	- OPPOSE	Georg Sue - Oppose
Frank Atchley	Support	Thonda Breen - Oppose
Lillian Atchley	Support	Jim Hfin - Oppose
Don		Bobby Noble - OPPOSE
MIKE Cardine	Support	Don - Oppose!
Linda Cardine	Support	
Roberto Vera	Support	
Richard Atanacio	- Oppose	
Carolyn Cryer	Support!	
Don + Liza Lytle	Support!	
Rebecca Thaley	- Oppose	
Annula Nauf	Support	
Donna Sarver	Support	
Ray Remick	Support	
Kay McBrath	Support	
Marion Jarrett	Support	
Joyce Doost	Support	
Benny Eyler	Support	
Maude Holt	Support	

Karen Hayden Support

Kim Montgomery Support

Sharon Walker support

Shanya Galloway Support



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print)

Julie Logan

City

Rock Falls

State

IL

Zip

61071

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Sank Valley Senior Living & Rehab.

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print) ANGELA MEHLBRECH

City STERLING State IL Zip 61081

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

ROCK RIVER GARDENS

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print) Doug Harridge

City Morrison State IL Zip 61270

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Pleasant View Rehab

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print)

Lynette McFadden

City

Walnut

State

IL

Zip

61376

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Petersen Health Care

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print) Susan Shaw

City Fairbury State IL Zip 61739

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Petersen Health Care

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



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HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print) Rachel Burton

City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Petersen Healthcare

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print) MARGARITA CORNEJO

City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

PETERSEN HEALTHCARE

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print) Ashley Kesson
City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Petersen Healthcare

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17-035

I. IDENTIFICATION

Name (Please Print) John Dietzen
City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

San Gabriel assisted Living

III. POSITION (Circle appropriate position)

Support

Oppose

Neutral

10/11/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Matt Hails

City

Centralia

State

IL

Zip

62801

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Liberty Village

III.

POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV.

Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

2

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION
Name (Please Print) Joe Thiele
City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)
Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (please circle appropriate position)
☒ Support Oppose Neutral

IV. Testimony (please circle)
☒ Oral Written



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

3

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

LYNDA SASSAMAN

City

ROCHELLE

State

IL

Zip

61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Vivian Holt

Janet Holt

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

4

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print) Irene Griffith

City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

concerned citizen

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

7

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print) Jason Penman
City Paw Paw State IL Zip 61353

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

8

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

TRICIA HERRERA

City

Rochelle

State

IL

Zip

61068

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Rochelle Area Chamber of Commerce

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

GREG FOLMAR

City

ROCHELLE

State

IL

Zip

61068

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

EDWARD JONES, ROTARY CLUB OF

ROCHELLE

III.

POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV.

Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Maureen Holt

City

Jalesburg

State

Ill

Zip

61401

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

LTC LVO

Liberty Village

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

12

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Rev Joy Akop

City

Rochelle

State

IL

Zip

61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Faith Lutheran Church

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

13

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Jenny Eyles

City

Coalesburg

State

IL

Zip

61401

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Liberty Village

III.

POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV.

Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

14

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Sarah Ritter

City

Rochelle

State

FL

Zip

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Liberty Village

III.

POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV.

Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

15

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Vicki Snyder Chlirp

City

Rochelle

State

IL

Zip

61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (please circle appropriate position)

Strongly

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

have written testimony ready

10/2/17

5.



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Sarah K. Flanagan

City

Rochelle

State

IL

Zip

61069

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

East City Senior Center

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

17

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

PAT Smith

City

Rochelle

State

IL

Zip

61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

ABC Concerned Citizens for H.C.

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

19

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Lynn Olds

City

Wyanet

State

IL

Zip

601379

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Liberty Village of Princeton

III.

POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV.

Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

20

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle -- Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

City

State

Zip

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III.

POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV.

Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

21

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Peggy Holt

City

Princeton

State

IL

Zip

61356

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Littonville Village

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

22

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Sandy Sullivan

City

Rochelle

State

IL

Zip

61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

23

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print) MICHAEL BRUBICS

City ROCHELLE State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

25

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Mick Boehle

City

Rochelle

State

IL

Zip

61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Health Care - local

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print) Clarence MacTaggart

City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

27

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

JOHN PRABHAKAR

City

ROCHELLE

State

IL

Zip

61068

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III.

POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV.

Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

LYDDA McKIBBEN

City

ROCHELLE

State

IL

Zip

61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

CITIZEN

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

WITH ESTATES

IV. Testimony (please circle)

ADDITION

Oral

Written



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

~~Spencer~~ Hayden
City Rochelle State IL Zip 61068

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

19

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Grey Wilson

City

Peoria

State

IL

Zip

61614

II. REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Rochelle Graded Health Care Center

Rochelle Rehab & Health Care Center

Several other homes in the planning

area

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

4

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

10

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

Carrie Dietzen

City

Rochelle

State

IL

Zip

61068
~~62401~~

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

San Gabriel Assisted Living

III. POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV. Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

6

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

JEN STARK

City

SYCAMORE

State

IL

Zip

60178

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

MENTUM HEALTHCARE, OREGON REHAB,

Franklin Grove Rehab, MAPLE CROSSING

AT AMBOY Rehab, Prairie Crossing Rehab, Prairie Crossing SUPPORTIVE Living

III.

POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV.

Testimony (please circle)

Oral

Written

10/2/17



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

5

Public Hearing Testimony Registration Form

Facility Name: Manor Court of Rochelle – Rochelle

Project Number: 17- 035

I. IDENTIFICATION

Name (Please Print)

DANIEL R. RITTER

City OREGON

State IL

Zip 61107

II.

REPRESENTATION (This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

OREGON LIVING : REHABILITATION CENTER (MOMENTUM HEALTHCARE)

III.

POSITION (please circle appropriate position)

Support

Oppose

Neutral

IV.

Testimony (please circle)

Oral

Written

10/2/17

My name is.....I was born and raised in Rochelle. I currently serve as the administrator at Liberty Village of Princeton. I have worked in the Long Term Healthcare field for 45 years. 25 of those years were served right here in Rochelle between the two Healthcare centers.

I believe that I worked in the two Rochelle Healthcare centers during their "prime years".

At that time we maintained record census levels and served many Rochelle Residents, Community Leaders and their families as well as Residents of surrounding communities. Today that is not the case. I hear of many Rochelle Elders leaving Rochelle to secure placement in facilities in other cities and counties outside of Rochelle.

In 1997 the Rochelle Healthcare centers were sold and I made a decision to leave Rochelle to advance my career in Long term care.

I would hear of multiple changes in ownership with the two Rochelle Healthcare centers through the years. I would hear of Rochelle Residents making decisions to secure their long term healthcare needs outside of Rochelle where they felt that their needs could be better met.

My family had to make difficult decisions to take two of my uncles that suffered from Alzheimer's disease out of town to secure the appropriate care they needed. Most recently in the last 2 months my cousins family had to make the decision to move him 45 minutes away from Rochelle to secure the level of care that he needed. They tried to locate a home closer but found that there are no secure dementia units in Rochelle and homes in some of the closer surrounding areas had waiting lists for their dementia units. Some of these waiting lists were 1 to 1 and half years long.

In 2014 I accepted a position at Liberty Village of Princeton where I found one of the most elaborate care settings that I have ever had the pleasure of working in. Our developer Don Fike was not only concerned with the types of buildings that he would build to care for Elders in the communities we serve but also developed innovative programs that would enhance senior lifestyles.

I was so impressed with what I found at Liberty Village of Princeton that one day while having lunch with Don Fike, I simply posed the question to him "what is the possibility of building a Liberty Village in my home town of Rochelle"....and here we are today.

There are plans in place to build a premier facility that the city of Rochelle desperately needs so that our Elders can age in place with grace and dignity in their home town.

It is my passion, that we be allowed to bring Liberty Village to Rochelle so that my Family my friends can experience the Liberty lifestyle and have viable options for care when they need it

Unknown
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right here in their home town. We shouldn't have to leave our community to receive the healthcare we need, when ~~we~~ we need it.

I implore you to grant the approval needed to build this home.

Please do not say NO to Rochelle's Elders and future Elder's .

pg. 1 of 2

My name is Lynn Olds. I am the Director of Marketing & Sales for Liberty Village of Princeton. My role at Liberty Village is very diverse. I spend time on campus, in the hospitals, doctors' offices, community organizations, as well as other nursing homes at times. Due to my exposure in all of these areas, I am able to provide a unique perspective on the depth of what Liberty Village brings to our seniors, employees, and community. Today, I would like to give you a glimpse of what it means to live the Liberty lifestyle.

First of all, we truly focus on the whole resident. We not only provide excellent nursing care, we fulfill their social and emotional needs. We believe each senior has the right to live the fullest life each and every day. We do this many different ways. We have an incredibly large variety of activities. We let the seniors choose the activities they want to do. We will frequently do impromptu activities. If a senior is in the mood to play chess instead of making a craft, we will play chess with him. Also, we make it a priority to give them the opportunity to spend time outside and even leave our campus. We have designed the exterior of our building to replicate a front porch you might see at home. This is a favorite visiting place enjoyed by our seniors and their loved ones. In addition, we run bus trips daily allowing them to enjoy time off of our campus. On our campus, we have a pond stocked with fish. You'll often find someone fishing or simply enjoying the view. Happiness is different for each individual. We get to know our seniors and adapt what we are doing to fulfill that happiness for them.

Another thing I find unique to Liberty Village is our campus itself. We have tried to replicate the home environment as much as possible. You won't find "institutional" furniture in our building. Our resident rooms are bigger than most other homes offering more personal space. The entire building is designed into neighborhoods where the seniors live with other seniors who are at a similar level of care. Each neighborhood even has its own dining room. Our seniors dine with their neighbors in a way that mimics how they would dine at a restaurant. We don't have one huge dining room where everyone eats at the same time creating an institutional atmosphere. Each neighborhood is designed with additional sitting spaces that replicate a home living room. This gives people the opportunity to visit privately in the same manner they would have at their own home. Another very important feature is our calm, clean, odor free environment. We work hard to keep it this way. If we wouldn't want it in our home, we won't allow it in theirs.

Next, we offer AJ's Fitness. This is a functional maintenance program designed to help keep our seniors strong and mobile. Any senior on our campus who is not receiving therapy is encouraged to attend AJ's Fitness where they work one on one with a Fitness Coordinator. Because we want our seniors to be as healthy as possible, we offer this program free of charge.

One program we are famous for is Bounce Back. This is our short term rehab program. We use state of the art therapy equipment that is specially designed for seniors. We offer physical, occupational, and speech therapy. As with everything at Liberty Village, we took it up another

0185
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level. Our therapists aren't only trained in their particular discipline. They are, also, trained in complex disease management, dementia, urinary incontinence, and lymph edema. Our speech therapist is, also, certified in vital stem for swallowing. We understand not everyone reacts to a condition in the same way. Therefore, we provide individualized programming designed to each person's specific needs. There is no "cookie cutter" program at Liberty Village. Our therapy gym is open 7 days a week. We have a rehospitalization intervention program where we track all Bounce Back patients who run a high risk of hospital readmission due to cardio and respiratory conditions. For at least 2 years, we have maintained a 0% readmission rate. When we rehab people to home, they are able to stay there.

Another successful program we offer is Garden Court. This is our state certified memory care program. Please do not confuse this with an "Alzheimers Unit" you might see at other facilities. That is not at all what we do. All of our Garden Court staff is specially selected and trained to care for people with memory diseases. We put a special emphasis on nutritional management and personal hygiene. Garden Court is an individualized activity based program. Our goal is to emphasize our seniors' strengths while maintaining their dignity. Programming is designed to anticipate problems and provide intervention before it escalates. Upon admission, we provide a free medication evaluation to make sure medications are necessary and beneficial. The Garden Court neighborhood is designed to have a calming effect to reduce stress and anxiety. This is even considered when choosing the color of the walls! The hallway is extra wide giving seniors room to move around. Garden Court seniors get the same opportunities to enjoy the outdoors and bus trips as the other seniors who call Liberty Village home. They have a secured private courtyard and take trips almost daily. We provide the highest quality of life we can. When someone can no longer benefit from the Garden Court program, they are able smoothly transition to custodial care on another part of our campus. They will still be in a familiar environment with familiar people. Their loved ones won't have to find another place for them to live. This gives everyone peace of mind.

As you can see, there are several things Liberty Village provides that other nursing homes don't. Our purpose is to care for seniors and provide them with the highest quality of life every single day. We believe in our purpose and are very passionate about it. Thank you for your time.

My name is Pastor Joy Alsop. I serve Faith Lutheran Church here in Rochelle. Faith Lutheran has been a part of the Rochelle community for over 50 years. Our congregation is made up of people who love this community and love being a part of it.

They are a diverse group of ages and abilities. That said, many of my members find themselves in need of care outside of their homes. Be it short-term rehabilitative services after a surgery or accident or long-term care due to a physical or mental concern that has become a part of their life. This is always a hard decision. We know that home is where most of us would prefer to be. We also know that this is not always a safe option.

I have been a part of this community for about 4 years. As a pastor, it has broken my heart to see that people have to leave the community that they love in order to receive these services. It is hard enough to make the move, but when you must leave Rochelle, too, it is just too much.

I have encountered several situations where the services that my member's needed were simply not offered here in Rochelle. They must leave town and this is very taxing on them emotionally and on their family and support system that tends to live here in Rochelle as well. I would like to point out that in my experience, people tend to go to Franklin Grove or Mt. Morris or Rockford. I have never had people in DeKalb. That is not to say that it does not happen, it just has not been my experience.

A couple of my specific encounters have been with couples. I will share two specific examples:

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In one case, the wife was in need of some rehabilitative care. Franklin Grove was the closest option that would work. The husband had to drive nearly 20 miles, one way, on a daily basis. He ended up being in a car accident one morning – a driver veered into his lane and he was hit head on. He then ended up needing to be clear over in Franklin Grove as well. Liberty Village would have been a perfect option for them. Thanks be to God, they are both in stable condition at this time.

The other example is a couple that were both in need of long-term care, but for very different reasons. They had to go clear to Mt. Morris to find what they needed. One spouse needed Alzheimer's care and the other did not. Liberty Village would have been a perfect option. The Alzheimer's spouse has now died and the other spouse is very lonely in Mt. Morris when the rest of his family is here in Rochelle.

I feel very strongly that Liberty Village would be a wonderful addition to the Rochelle Community.

Thank you for your time and consideration.



Pg. 1025

October 10, 2017

Illinois Health Facilities Planning Board
525 West Jefferson Street, 2nd Floor
Springfield, IL. 62761

Attention: Chairman

**Subject: 17-035 CON Application for Manor Court of Rochelle/ Public Hearing
Comments**

Dear Illinois Health Facilities Planning Board,

I am writing to express Petersen Health Care's **opposition** to Frances House, Inc., and Residential Alternatives of Illinois, Inc's application to establish a new 92-bed skilled long-term care facility to be located on Flagg Road and west of 20th Street, in Rochelle, Illinois. Ogle County HSA1. Petersen Health Care owns and operates Rochelle Rehab & Health Care Center and Rochelle Gardens Care Center, both located within 1 mile of the proposed project. Petersen Health Care also owns several other nursing homes located within the immediate HSA1 planning area. Petersen Health Care and other area providers believe the CON application does not comply with the historic basis of this program and it is inappropriate for the Board to review this project. "The CON is designed to restrain rising health care costs by preventing unnecessary construction or modification of health care facilities". Clearly, based on the law; The Health Facilities Planning Act (Act) (20ILCS3960), there is no "need" for this project. This project is not "innovative"; there is no unmet "need" in HSA1, Ogle County, or Rochelle; they are not proposing an innovative service; this is clearly an unnecessary duplication of services; and there is not sufficient staff available to support the project. Those are the facts. The clear objective of this project is to cannibalize existing long term care providers in the planning area...EXACTLY THE THING THIS ACT IS DESIGNED TO PREVENT! Make no mistake, if this project is approved our 2 facilities will cease to exist in Rochelle.

Petersen Health Care's two skilled facilities referenced in the CON application averaged 32 available/open beds per day throughout all of 2016 and 2017; a decade long trend that no person knowledgeable of the long term care industry in Illinois expects to reverse any time soon. The two facilities together averaged 73.5% occupancy in both 2016 and through 9 months of 2017.* Census figures averaging far below the State's/Planning Act's optimum 90% threshold. The census performance of our two facilities is mirrored by the other facilities located in HSA1 and Ogle County. The current "Summary of General Long-Term Nursing Beds and Need by Health Service Area proves that by 2020 there will be 553 excess beds in HSA1, including 16 excess beds in Ogle County. We believe even those numbers mask the true downward trends in the state. The most recent census data documents a 4.2% population loss in Ogle County between 2010-2016 and a 3.6% population loss in Rochelle during the same timeframe (Kaiser Family Foundation/ U.S. Census Bureau). This population loss coupled with industry trends including; government focus on home & community based services, the explosion of new Assisted/Independent Living facility/beds into the market, and hospital trends reopening swing beds and skilled wings to prevent readmission penalties are further expected to drive down skilled nursing home census all across the state for the foreseeable future. The addition of another nursing facility in Ogle County is not necessary to meet the long-term care needs of the elderly population of the area now or in the future. No legitimate argument can be made that there is a need for this facility in Rochelle, Illinois.

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	2016	%	2017	%
Rochelle RHCC	35/50	70%	35.5/50	70%
Rochelle Gardens	57/74	77%	57/74	77%
		73.5% avg.		73.5% avg.

"To obtain a permit, a person must justify that a proposed project is needed"

Section 1125.210 General Long-Term Care Category of Service

c) Utilization Target

Facilities providing a general long-term care service should operate those beds at a minimum annual average occupancy of 90% or higher.

d) Need Determination

8) Subtract the number of existing beds in the planning area from the projected planning bed need to determine the projected number of **excess (surplus)** beds or the projected need for additional (deficit) beds in an area.

EXECUTIVE BRANCH

(20 ILCS 3960) Illinois Health Facilities Planning Act.

*"This Act shall establish a procedure (1) which requires a person establishing, construction or modifying a health care facility, as herein defined, to have qualifications, background, character and financial resources to adequately provide a proper service for the community' (2) that promotes the orderly and economic development of health care facilities in the State of Illinois **that avoids unnecessary duplication of such facilities**; and (3) that promotes planning for and development of health care facilities needed for comprehensive health care especially in areas where the health planning process had identified unmet needs"*

Simply put, **this project fails** on both of the most basic tenants of the Act. The proposed facility is clearly an unnecessary duplication of such facilities, and there is no unmet need; despite the fact the applicant & their consultants tried mightily in their narrative to create one out of whole cloth. Unfortunately for the applicant, their narrative is a complete work of fiction filled with faulty assumptions, fuzzy math and outright falsehoods. The most glaring of which appears on page 52, "The facilities also report a combined 11 registered sex offenders among their total population". This claim is **false** and the applicant should be ashamed of themselves for engaging in such tactics. Petersen Health Care has never admitted a single sex offender in ANY of our homes and prohibits the admission of registered sex offenders in all of our more than 100 homes. We do not now, nor have we ever, included sex offenders in our homes census. EVER! Shame on the applicant for engaging in this kind of damaging slander.

A simple review of the 3 key Review Criteria definitively proves it is inappropriate for the Board to review or approve this project:

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Section 1125.530 Planning Area

a) *Bed Need Determination*

- 1) *The number of beds to be established for general LTC is in conformance with the projected bed need specified and reflected in the latest updates to the HFSRB Inventory*
- 2) *The number of beds proposed shall meet or exceed the occupancy standard specified in Section 1125.210(c)*

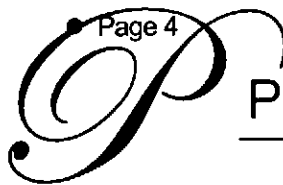
The applicant **fails** on both accounts. There is no bed need here. Further, HSA1 does not exceed this occupancy standard, and Ogle county doesn't even come close. The current Inventory of Need Determination shows Ogle County currently at 68% occupancy. Additionally, the applicant's claims that there are projected referrals available to support this LTC facility are completely implausible & unrealistic. Those referrals are not present now anywhere in HSA1 and population estimates clearly show they won't be available in the future. Those outrageous projections should be dismissed out of hand.

Section 1125.580 Unnecessary Duplication/Maldistribution

- a) *The applicant shall document that the project will not result in an unnecessary duplication.*
- b) *The applicant shall document that the project will not result in maldistribution of services. Maldistribution exists when the identified area (within the planning area) has an excess supply of facilities, beds and services, characterized by such factors as...*
- c) *The applicant shall document that, within 24 months after project completion, the proposed project:*
 - 1) *Will not lower the utilization of other area providers below the occupancy standards specified in Section 1125.210(c); and*
 - 2) *Will not lower, to a further extent, the utilization of other area facilities that are currently (during the latest 12-month period) operating below the occupancy standards.*

This project will clearly cause an unnecessary duplication/maldistribution of services. Simply, this project is an attempt to cannibalize current providers, cherry-pick residents with higher reimbursement pay types, put current providers out of business, and leaves low income, state supported citizens of Rochelle and Ogle County with no long term care options. Those are the cold facts. This project will lower the utilization of other area providers below the occupancy standards. There is no question that this will occur. This project should not be approved.

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Section 1125.590 Staffing Availability

The applicant shall document that relevant clinical and professional staffing needs for the proposed project were considered and that staffing requirements of licensure, certification and applicable accrediting agencies can be met. In addition, the applicant shall document that necessary staffing is available by providing letters of interest from prospective staff members, completed applications for employment, or a narrative explanation of how the proposed staffing will be achieved.

The applicant's response to this requirement is perhaps the most outrageous piece of pie in the sky fiction contained in the entire application. Let's be clear here...there is not staff available in HSA1 to support another LTC. The claim that those staff are available is false on its face. They aren't. There is a staffing crisis across the health care continuum in Illinois and that fact is no secret. To claim otherwise is nonsense. The LTC providers in HSA1, Ogle County, and Rochelle face daily struggles to recruit and retain enough staff to meet our resident's needs, just as every other health care provider type in the area does. Adding another LTC into this crisis would be truly devastating for all providers of all types in the planning area.

So, why is this important? Why does Illinois have a Health Facilities Planning Act and Planning Board in the first place? What is the interest of Illinois legislators, tax payers, and citizens in this process? Simple, more than 6 in 10, or 60% of all nursing home residents in Illinois have their stay paid for by Medicaid, the State, through a federally funded, state administered program...Medicaid. Illinois pays the lowest daily rate in the nation for a Medicaid stay, and has for years. Additionally, due to decades old budgetary challenges in the state, providers often wait months, even years to be reimbursed for the care they have provided. The state has an extreme vested interest in ensuring providers will continue to operate in this challenging financial environment. The protection provided by the Health Facilities Planning Act and the CON process has been a very important factor in providers such as Petersen Health Care agreeing to care for the States most needy elderly. Removing this protection and setting this precedent will have huge ramifications all over this State. The CON protection is also critical in providers obtaining financing and lines of credit to continue to operate in this difficult financial climate. Removing this protection will send shock waves through the capital lending, HUD financing, private financial and health care sectors of this State. Extreme care should be taken before the Board allows this end run around the Health Facilities Planning Act. Finally, as I stated earlier, the applicant has no interest in providing care to residents whose stay is paid for by Medicaid. That is not their business model. They attempt to attract the more lucrative Private Pay, Private Insurance, and Medicare pay types. The citizens most affected if this project is approved will be the lowest income and neediest seniors in this community. They will not have any options. Providers who care for a majority of Medicaid residents, like Petersen Health Care, need some smaller percentage of residents with more generous daily rates to be able to survive. This is no secret to the legislators and budgeters in Springfield. The state's primary reason given for Illinois paltry daily Medicaid rate is the perceived ability of providers to "cost shift" a smaller percentage to other pay types. The theory being providers will care for the state's Medicaid population at a break even or worse rate if they can make a small margin by caring for other more lucrative pay types as well. If this project is approved and the applicant is allowed to cherry pick the residents with more lucrative pay types Petersen Health Care and others will be driven out of the marketplace. Facilities just won't be able to survive this. Leaving the poorest citizens of Rochelle and surrounding communities without any local option to provide for their long term care needs. Again, the main purpose of this Act is to provide this protection and continuity of care for the neediest of our citizens.

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October 12, 2017

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It's important to note, this applicant and their consultant group have led a decade long effort in Springfield to change or end this act through the legislative process. They first attempted to change the bed need formula, then they attempted to change the entire act through the installation of a "commission" to study the issue & the proposed 'bed buy, sell, transfer' boondoggle, and finally they have attempted to disband the Health Facilities Planning Act & Health Facilities Planning Board entirely. They have been soundly defeated in each of those efforts. All of their efforts to defeat this act have been based on a single faulty premise, what they describe as; *"the aging and decaying bed inventory in Illinois"*. I've heard it again and again for more than a decade. We get it, they want to build nursing homes; however, the state has a greater interest in preserving health care options for the poorest elderly in Illinois. That is why through 5 legislative sessions their efforts to kill or change the Health Facilities Planning Act have been thwarted. Now they are trying this Hail Mary approach to find a way around the will of the legislature, the industry, and the hard working providers caring for the most needy of our neighbors. So what is the main argument in their application to support their imaginary need? It can be found on... pg. 51 *"The issue that needs to be addressed in and around the market of Rochelle, Ogle County, Illinois is the aging, size and overall desirability of the existing health care resources serving the Rochelle nursing care market that affect quality"*. Sound familiar? *"the aging and decaying nursing home bed inventory in Illinois"*. Distinguished Board members, we have heard all this before. The legislature, the industry, the financial community, and health care providers have all soundly rejected this argument.

In conclusion, a change this profound in the Illinois long-term care marketplace should not be done through this back door approach. A decision this profound should be done with the full participation of all affected providers, the long-term care provider associations, the lending & financial community, state legislators, the Governor's office, and the resident advocate community. We implore this board not to set this bad precedent. This project should be soundly defeated. Approval of this project will have profound negative implications throughout the entire state, it does not satisfy the historic basis of this program, there is no need, there is no staff, it is an unnecessary duplication of services, and it should be unanimously and soundly defeated.

Regards,



Greg Wilson
Senior Vice President of Operations
Petersen Health Care

"Caring with a Hometown Touch"

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Name of Facility	City	County	HSA (Health Service Area)	Town Pop. by US Bureau of Census, 2010	Town Pop. by US Bureau of Census, 2016	%±
Neighbors Rehab Center	Byron	Ogle	HSA 1	3,753	3,625	-3%
Oregon Living and Rehab	Oregon	Ogle	HSA 1	3,721	3,545	-5%
Pinecrest Manor	Mount Morris	Ogle	HSA 1	2,998	2,852	-5%
Polo Rehab	Polo	Ogle	HSA 1	2,355	2,229	-5%
Rochelle Garden	Rochelle	Ogle	HSA 1	9,574	9,227	-4%
Rochelle Rehab	Rochelle	Ogle	HSA 1	9,574	9,227	-4%
Total (Ogle)				53,497	51,273	-4%
Maple Crossing at Amboy	Amboy	Lee	HSA 1	2,500	2,333	-7%
Dixon Rehab	Dixon	Lee	HSA 1	15,733	15,135	-4%
Franklin Grove Living and Rehab	Franklin Grove	Lee	HSA 1	1,021	958	-6%
Heritage Square	Dixon	Lee	HSA 1	15,733	15,135	-4%
Total (Lee)				36,031	34,251	-5%
Bethany Rehab	Dekalb	Dekalb	HSA 1	43,862	43,194	-2%
Dekalb County	Dekalb	Dekalb	HSA 1	43,862	43,194	-2%
Oak Crest	Dekalb	Dekalb	HSA 1	43,862	43,194	-2%
Pine Acres Rehab	Dekalb	Dekalb	HSA 1	43,862	43,194	-2%
Prairie Crossing Living & Rehab	Shabbona	Dekalb	HSA 1	925	933	+1%
Sandwich Rehab	Sandwich	Dekalb	HSA 1	7,421	7,358	-1%
Willow Crest	Sandwich	Dekalb	HSA 1	7,421	7,358	-1%
Total (Dekalb)				105,160	104,528	-1%

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* Oak Crest (2014, 2015, and 2016) estimated based off of published 2013 numbers

Population

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Name of Facility	NET INCOME OR LOSS FOR THE YEAR (2013)	NET INCOME OR LOSS FOR THE YEAR (2014)	NET INCOME OR LOSS FOR THE YEAR (2015)	NET INCOME OR LOSS FOR THE YEAR (2016)	Property Taxes Accrued from 2011 - 2015
Neighbors Rehab Ce				\$ (388,609.00)	
Oregon Living and Re					
Pinecrest Manor			\$ (174,272.00)	\$ (989,016.00)	
Polo Rehab					
Rochelle Garden	\$ (251,940.00)	\$ (172,184.00)		\$ (235,541.00)	\$ 117,215.00
Rochelle Rehab					\$ 196,689.00
Total (Ogle)				\$ (1,404,965.00)	\$ 313,904.00
Maple Crossing at An		NO DATA AVAILA	\$ (498,271.00)	\$ (441,589.00)	
Dixon Rehab	\$ (431,296.00)	\$ (311,412.00)	\$ (572,971.00)	\$ (390,931.00)	
Franklin Grove Living					
Heritage Square	\$ (206,041.00)	\$ (100,838.00)	\$ (593,282.00)		
Total (Lee)	\$ (213,268.00)	\$ (51,274.00)	\$ (1,472,248.00)	\$ (591,284.00)	
Bethany Rehab	\$ (4,155.00)				
Dekalb County	\$ (137,712.00)				
Oak Crest	NO DATA AVAILAB	NO DATA AVAILA	NO DATA AVAILABLE	NO DATA AVAILABLE	
Pine Acres Rehab	NO DATA AVAILAB	\$ (92,761.00)			
Prairie Crossing Living					
Sandwich Rehab			\$ (488,400.00)	\$ (318,500.00)	
Willow Crest	\$ (125,208.00)		\$ (284,164.00)		
Total (Dekalb)	(21,927.00)		(83,139.00)		

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* Oak Crest (2014, 2015, and 2016) estimated based off of published 2013 numbers

Cost Report Data (Net Income)

Name of Facility	2016 Patient Days	Avg Census 2016	% Occupied 2016	2015 Patient Days	Avg Census 2015	% Occupied 2015
Neighbors Rehab Center	24,099	66.02	50%	26,620	72.93	72%
Oregon Living and Rehab	24,091	66.00	63%	24,868	68.13	66%
Pinecrest Manor	39,681	108.72	87%	39,567	108.40	87%
Polo Rehab	17,667	48.40	60%	18,949	51.92	64%
Rochelle Garden	21,033	57.62	78%	21,987	60.24	81%
Rochelle Rehab	12,921	35.40	71%	11,863	32.50	65%
Total (Ogle)	139,492	63.69	68%	143,854	65.69	72%
Maple Crossing at Amboy	17,804	48.78	50%	18,190	49.84	51%
Dixon Rehab	29,386	80.51	83%	27,733	75.98	78%
Franklin Grove Living and Rehab	29,968	82.10	62%	32,999	90.41	75%
Heritage Square	8,117	22.24	82%	8,587	23.53	87%
Total (Lee)	85,275	58	69%	87,509	59.94	73%
Bethany Rehab	28,954	79.33	88.14%	27,266	74.70	83.00%
Dekalb County	64,380	176.38	92.83%	61,654	168.92	88.90%
Oak Crest	25,017	68.54	93.89%	25,017	68.54	93.89%
Pine Acres Rehab	32,783	89.82	75.48%	32,753	89.73	75.41%
Prairie Crossing Living & Rehab	23,654	64.81	71.21%	23,273	63.76	70.07%
Sandwich Rehab	17,480	47.89	76.02%	16,854	46.18	73.29%
Willow Crest	38,046	104.24	89.86%	35,606	97.55	84.10%
Total (Dekalb)	230,314	90.14	83.92%	222,423	87.05	81.24%

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* Oak Crest (2014, 2015, and 2016) estimated based off
of published 2013 numbers

2016 Occupancy % (90% Target)

Name of Facility	2014 Patient Days	Avg Census 2014	% Occupied 2014	2013 Patient Days	Avg Census 2013	% Occupied 2013
Neighbors Rehab Center	28,804	78.92	78%	30,538	83.67	83%
Oregon Living and Rehab	24,301	66.58	64%	25,257	69.20	67%
Pinecrest Manor	41,331	113.24	91%	41,047	112.46	90%
Polo Rehab	19,000	52.05	64%	18,975	51.99	64%
Rochelle Garden	21,566	59.08	80%	19,877	54.46	74%
Rochelle Rehab	14,478	39.67	79%	14,501	39.73	79%
Total (Ogle)	149,480	68.26	76%	150,195	68.58	76%
Maple Crossing at Amboy	18,414	50.45	52%	18,414	50.45	52%
Dixon Rehab	29,189	79.97	82%	28,834	79.00	81%
Franklin Grove Living and Rehab	35,942	98.47	81%	36,598	100.27	83%
Heritage Square	9,244	25.33	94%	9,490	26.00	96%
Total (Lee)	92,789	63.55	77%	93,336	63.93	78%
Bethany Rehab	29,284	80.23	89.14%	29,444	80.67	89.63%
Dekalb County	62,533	171.32	90.17%	63,161	173.04	91.08%
Oak Crest	25,017	68.54	93.89%	25,017	68.54	93.89%
Pine Acres Rehab	34,557	94.68	79.56%	34,521	94.58	79.48%
Prairie Crossing Living & Rehab	24,044	65.87	72.39%	21,195	58.07	63.81%
Sandwich Rehab	16,216	44.43	70.52%	16,495	45.19	71.73%
Willow Crest	34,911	95.65	82.45%	33,938	92.98	80.16%
Total (Dekalb)	226,562	88.67	82.59%	223,771	87.58	81.40%

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* Oak Crest (2014, 2015, and 2016) estimated based off of published 2013 numbers

2014 Occupancy % (90% Target)

Name of Facility	Number of Licensed Beds 2013	Number of Licensed Beds 2016	Projected		%± census between 2013 and 2016
			Beds Needed (2020)	# of Excess Beds	
Neighbors Rehab Center	101	131			-32%
Oregon Living and Rehab	104	104			-3%
Pinecrest Manor	125	125			-3%
Polo Rehab	81	81			-4%
Rochelle Garden	74	74			4%
Rochelle Rehab	50	50			-9%
Total (Ogle)	535	565	549	16	-8%
Maple Crossing at Amboy	97	97			-2%
Dixon Rehab	97	97			2%
Franklin Grove Living and Reh	121	132			-21%
Heritage Square	27	27			-14%
Total (Lee)	342	353	281	72	-9%
Bethany Rehab	90	90			-1%
Dekalb County	190	190			2%
Oak Crest	73	73			0%
Pine Acres Rehab	119	119			-4%
Prairie Crossing Living & Reha	91	91			7%
Sandwich Rehab	63	63			4%
Willow Crest	116	116			10%
Total (Dekalb)	742	742	758	-16	3%

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* Oak Crest (2014, 2015, and 2016) estimated based off of published 2013 numbers

Bed Need

Medicaid's Role in Nursing Home Care

Jun 20, 2017



6/10
-60% - 11% - 825
8HC
88.11



MEDICAID'S ROLE IN NURSING HOME CARE

JUNE 2017

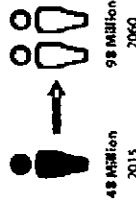
Nursing homes are key providers of long-term care in the US, supplying medical, skilled nursing, and rehabilitative services on an inpatient basis to individuals who need help with self-care, such as bathing and dressing. As of 2015, there were 1.4 million people, primarily seniors, served in nearly 16,000 nursing homes.

Medicaid is the primary payer for nursing home care, providing needed long-term care services not offered by Medicare that would otherwise be unaffordable for seniors with low incomes and relieving the care burden from families.

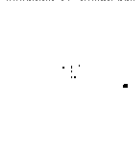
Medicaid currently provides federal matching funds with no pre-set limit that help states cover nursing home care. Medicaid restructuring and cuts in federal funds as proposed in the American Health Care Act could limit states' ability to provide these services.

Long-Term Care Need Continues to Grow Due to an Aging Population

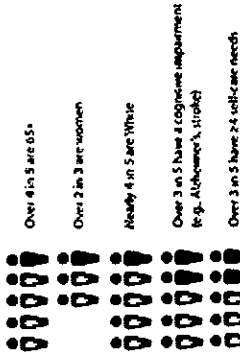
15% of the total US population was 65+ in 2015, and the total number of seniors is expected to double by 2060.



1 in 3 people turning 65 will require nursing home care at some point during his or her life.



In 2015, 1.4 Million people were in nursing homes:



\$82,000

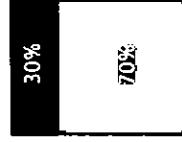
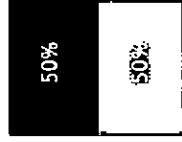
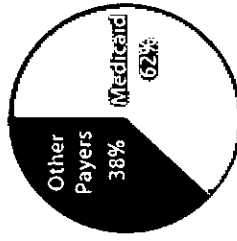
Typical annual cost of nursing home care in 2016, which is nearly 3x the annual income of most seniors



Medicaid Is the Primary Payer for Nursing Home Care Providing Needed Services Not Offered by Other Coverage

Medicaid is the primary payer for long-term care, including \$55 billion in 2015 for nursing homes. Medicare only covers limited post-acute care, and few people can afford private coverage.

Medicaid covers 6 in 10 nursing home residents.



Medicaid Senior LTC Users 1.9 Million
Medicaid Senior LTC Spending \$72 Billion

Community
Nursing Homes

Changes to Medicaid Financing Could Limit Access to Nursing Home Care for Seniors

44 states that extend financial eligibility up to 300% SSI* for people who need long-term care beyond the federal minimum of SSI could be at risk if states scale back this optional coverage.

*SSI = 73% of the federal poverty level (FPL) in 2017

Capping Medicaid financing could lock in differences in the share of long-term care spending devoted to nursing homes, which varies significantly across states as of FY 2015.



Less than 10% (11 states)
20%-29% (19 states, including DC)
40%-49% (15 states)
50% or more (6 states)

Medicaid is a key payer for nursing home care.
- Reductions in federal Medicaid financing as proposed by the American Health Care Act could limit states' ability to respond to these needs.
- Lower reimbursement rates can lead to reductions in staffing, which can result in lower nursing home care quality and poor care outcomes.

Sources for this document are available at: <http://kftr.org/infographic/mcdis-vide-in-nursing-home-care>.
The Henry J. Kaiser Family Foundation Headquarters: 2100 Sand Hill Road, Menlo Park, CA 94023 | Phone: 650-854-9400
Washington Offices and Barbara Jordan Conference Center: 1330 G Street, NW, Washington, DC 20005 | Phone: 202-347-5270
www.kff.org | Email Alerts: kff.org@kff.org | Facebook: <https://www.facebook.com/KaiserFamilyFoundation> | Twitter: twitter.com/KaiserFamilyFound
Filling the need for trusted information on national health issues, the Kaiser Family Foundation is a nonprofit organization based in Menlo Park, California.

Table 1: Medicaid's Role in Nursing Home Care, by State

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State	Residents Age 65+ (2015)		Medicaid Enrollees Age 65+ (FY 2014)		Certified Nursing Facility Residents with Medicaid (2015)		Nursing Home Care Spending (FY 2015)		S1 Co L Ne U 30 S (2)
	Number of State Residents	Share of State Population	Number	Percent of Total Medicaid Enrollees	Number of Residents	Share of Total Nursing Facilities Residents	Amount	Share of Total Medicaid LTC Spending	
United States	47,546,500	15%	7,379,600	9%	832,460	62%	\$54,832,318	35%	
Alabama	713,400	15%	140,800	11%	15,252	67%	\$944,141	53%	
Alaska	79,500	11%	10,300	7%	490	79%	\$181,745	32%	
Arizona	1,035,000	15%	128,500	8%	6,812	59%	\$448,951	27%	
Arkansas	456,000	15%	74,100	8%	11,605	66%	\$661,360	33%	
California	5,075,800	13%	1,205,200	8%	62,299	62%	\$3,250,424	24%	
Colorado	759,400	14%	102,400	8%	9,899	61%	\$694,011	33%	
Connecticut	554,300	16%	129,100	14%	16,438	69%	\$1,197,886	36%	
District of Columbia	87,300	13%	15,500	7%	2,550	80%	\$272,899	49%	
Delaware	156,200	16%	24,600	9%	2,043	60%	\$232,784	30%	
Florida	3,757,100	19%	610,500	13%	41,813	57%	\$3,472,597	59%	
Georgia	1,298,000	13%	195,900	9%	23,822	72%	\$1,289,089	50%	
Hawaii	231,200	17%	29,800	9%	2,228	63%	\$287,794	58%	
Idaho	252,100	15%	22,700	7%	2,369	64%	\$266,129	41%	
Illinois	1,881,700	15%	275,100	8%	39,514	57%	\$1,428,479	29%	
Indiana	1,010,000	16%	103,600	8%	24,337	62%	\$2,006,714	57%	
Iowa	486,700	16%	46,800	7%	11,552	48%	\$623,815	29%	
Kansas	397,000	14%	41,100	9%	9,494	53%	\$525,010	43%	
Kentucky	723,100	16%	99,100	8%	15,588	67%	\$957,640	49%	
Louisiana	598,700	13%	123,100	9%	19,149	74%	\$963,115	42%	
Maine	275,400	21%	64,500	18%	3,935	64%	\$277,016	28%	
Maryland	776,700	13%	107,400	8%	15,036	61%	\$1,174,675	38%	
Massachusetts	1,031,500	15%	200,500	10%	24,743	61%	\$1,814,969	27%	
Michigan	1,656,100	17%	159,600	6%	23,428	60%	\$1,782,637	55%	
Minnesota	890,600	16%	123,400	9%	13,404	52%	\$780,647	17%	
Mississippi	424,700	14%	92,800	12%	12,017	75%	\$761,814	48%	

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Missouri	921,000	15%	88,500	8%	24,239	63%	\$1,068,006	32%
Montana	182,600	18%	17,800	10%	2,563	58%	\$165,541	35%
Nebraska	267,800	14%	28,300	10%	6,111	52%	\$340,032	41%
Nevada	413,100	14%	51,500	8%	2,789	58%	\$214,753	35%
New Hampshire	206,800	16%	14,800	8%	4,249	64%	\$341,826	42%
New Jersey	1,323,400	15%	161,800	10%	26,676	59%	\$1,759,936	36%
New Mexico	342,300	17%	67,200	8%	3,679	66%	\$260,091	19%
New York	3,146,000	16%	711,400	11%	69,694	67%	\$6,882,589	30%
North Carolina	1,386,200	14%	222,200	10%	23,370	64%	\$1,179,921	39%
North Dakota	111,600	15%	7,500	8%	2,855	51%	\$266,606	45%
Ohio	1,730,400	15%	204,600	7%	44,549	59%	\$2,786,965	39%
Oklahoma	554,100	14%	68,200	7%	12,143	65%	\$577,093	41%
Oregon	615,500	15%	74,800	7%	4,179	56%	\$388,305	17%
Pennsylvania	2,169,500	17%	267,700	10%	49,375	63%	\$3,848,905	43%
Rhode Island	162,700	16%	24,500	8%	4,964	63%	\$361,594	41%
South Carolina	793,500	17%	107,800	8%	10,084	60%	\$583,852	38%
South Dakota	131,700	16%	13,000	9%	3,252	52%	\$138,775	42%
Tennessee	1,053,600	16%	149,400	10%	16,653	60%	\$1,096,127	42%
Texas	3,345,400	12%	479,600	9%	57,157	61%	\$2,640,412	28%
Utah	326,700	11%	18,500	4%	2,735	51%	\$190,765	34%
Vermont	102,400	17%	22,800	11%	1,667	64%	\$121,984	30%
Virginia	1,186,900	14%	114,600	11%	16,433	59%	\$948,887	31%
Washington	1,158,500	16%	113,900	6%	10,006	59%	\$644,037	22%
West Virginia	343,500	19%	45,300	8%	7,122	76%	\$606,591	41%
Wisconsin	879,900	15%	171,000	12%	14,728	55%	\$1,059,237	30%
Wyoming	83,600	15%	6,400	7%	1,411	62%	\$103,148	39%

NOTES: Governor party affiliation and Medicaid expansion status as of 2017.

SOURCE: Kaiser Family Foundation estimates based on the Census Bureau's March 2016 Current Population Survey (CP Annual Social and Economic Supplement). KFF estimates based on analysis of data from the 2014 Medicaid Statistical Information System (MSIS). For states with fewer than four quarters of MSIS data, we also adjusted enrollment using secondary data (specifically, the Medicaid Budget and Expenditure System) to represent a full fiscal year of enrollment. We accounted for a state's expansion status, the number of quarters of missing data, and the state's historical patterns of enrollment in making state-by-state adjustments. Due to these adjustments, enrollment estimates here may not match other analysis based on the MSIS data or state's own reporting systems. Harrington, Carrillo, and Garfield, based on OSCAR/CASPER Data. Truven, Medicaid Expenditures for Long-Term Services and Supports (LTSS) in FY 2015, April 14, 2017. KCMU Medicaid Financial Eligibility Survey for Seniors and People with Disabilities (2015).

I have written testimony that I will refer to loosely in my comments today. 2 copies provided. I would like to reserve our right to revise and extend those written comments as we have obtained legal counsel in this matter and intend a more thorough written defense prior to the December 20 deadline...

I frankly find it really hard to believe we are here today...CON in the view of most in the industry has been a settled issue for several years; there is no bed need in any HSA & virtually no counties in Illinois due to across the board census decline. That is not expected to change anytime soon. Only CON approved that we are aware of are for 1 for 1 bed replacement, innovative service, legitimate unmet need! None of those factors are present here! 3 major factors in the statewide census decline.

- AL/IL boom
- Home & community based services focus at all levels of government
- Hospital readmissions, swing beds & skilled units

Application, applicant & the consultants involved. 10 year assault on the CON process through at least 5 legislative sessions. They want to build new nursing homes...we get it. They have tried mightily to get that done in Springfield.

"aging & decaying bed inventory in Illinois"

Upwards of \$100 million dollars.

- Change the bed need calculation, out of service beds, claw back
 - Financing, HUD loans
- Commission to study the issue "bed buy/sell" + "transfer"
- Eliminate the HFPA & the Board altogether.

They have been defeated at every turn in Springfield so we are her today with this attempted end around, Hail Mary, Statue of Liberty. Honorable Board...this would be a horrible precedent to set!

THERE IS NO NEED FOR THIS PROJECT...now the definition of need & the bed need calculations are specific things, memorialized in the law. You don't get to

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brainstorm & spitball until your consultant comes up with some imaginary need, as was done here. You don't get to design your own bed need calculation to find some imaginary bed need because the formula in the law shows there are actually excess beds in the planning area & no need for years to come...as is the case here. No...you have to follow the law (20ILCS3960). & based on the law...there is no need in this HSA. & again, this has been settled over and over again in Springfield over the last decade.

This project is not "innovative"; there is no unmet "need" in HSA1, Ogle County, or Rochelle; they are not proposing an innovative service; this is clearly an unnecessary duplication of services; and there is not sufficient staff available to support the project. Those are just the facts.

The clear objective of this project is to cannibalize existing long term care providers in the planning area...EXACTLY THE THING THIS ACT IS DESIGNED TO PREVENT! Make no mistake, if this project is approved our 2 facilities will cease to exist in Rochelle. & the poor & neediest citizens of this area needing long term care will have no options in this community.

This project does not, by any stretch of the imagination, comply with the historic basis of this program. Quite the opposite. Allowing this would be a horrible precedent to set.

So let me now address some specifics of the application and the marketplace in Illinois.

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Petersen Health Care's two skilled facilities referenced in the CON application averaged 32 available/open beds per day throughout all of 2016 and 2017; a decade long trend that no person knowledgeable of the long term care industry in Illinois expects to reverse any time soon. The two facilities together averaged 73.5% occupancy in both 2016 and through 9 months of 2017.* Census figures averaging far below the State's/Planning Act's optimum 90% threshold. The census performance of our two facilities is mirrored by the other facilities located in HSA1 and Ogle County. The current "Summary of General Long-Term Nursing Beds and Need by Health Service Area proves that by 2020 there will be 553 excess beds in HSA1, including 16 excess beds in Ogle County (Page A-4). We believe even those numbers mask the true downward trends in the state. The most recent census data documents a 4.2% population loss in Ogle County between 2010-2016 and a 3.6% population loss in Rochelle during the same timeframe (Kaiser Family Foundation/ U.S. Census Bureau). This population loss coupled with industry trends including; government focus on home & community based services, the explosion of new Assisted/Independent Living facility/beds into the market, and hospital trends reopening swing beds and skilled wings to prevent readmission penalties are further expected to drive down skilled nursing home census all across the state for the foreseeable future. The addition of another nursing facility in Ogle County is not necessary to meet the long-term care needs of the elderly population of the area now or in the future. No legitimate argument can be made that there is a need for this facility in Rochelle, Illinois.

"To obtain a permit, a person must justify that a proposed project is needed"

Section 1125.210 General Long-Term Care Category of Service

c) Utilization Target

Facilities providing a general long-term care service should operate those beds at a minimum annual average occupancy of 90% or higher.

EXECUTIVE BRANCH

(20 ILCS 3960) Illinois Health Facilities Planning Act.

"This Act shall establish a procedure (1) which requires a person establishing, construction or modifying a health care facility , as herein defined, to have qualifications, background, character and financial resources to adequately provide a

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*proper service for the community' (2) that promotes the orderly and economic development of health care facilities in the State of Illinois **that avoids unnecessary duplication of such facilities**; and (3) that promotes planning for and development of health care facilities needed for comprehensive health care especially in areas where the health planning process had identified **unmet needs**"*

Simply put, **this project fails** on both of the most basic tenants of the Act. The proposed facility is clearly an unnecessary duplication of such facilities, and there is no unmet need; despite the fact the applicant & their consultants tried mightily in their narrative to create one out of whole cloth. Unfortunately for the applicant, their narrative is a complete work of fiction filled with faulty assumptions, fuzzy math and outright falsehoods. The most glaring of which appears on page 52, "The facilities also report a combined 11 registered sex offenders among their total population"*. This claim is **false** and the applicant should be ashamed of themselves for engaging in such tactics. Petersen Health Care has never admitted a single sex offender in ANY of our homes and prohibits the admission of registered sex offenders in all of our more than 100 homes. We do not now, nor have we ever, included sex offenders in our homes census. EVER! Shame on the applicant for engaging in this kind of damaging slander.

A simple review of the 3 key Review Criteria definitively proves it is inappropriate for the Board to review or approve this project:

Section 1125.530 Planning Area

a) *Bed Need Determination*

- 1) *The number of beds to be established for general LTC is in conformance with the projected bed need specified and reflected in the latest updates to the **HFSRB Inventory**.*
- 2) *The number or beds proposed shall meet or exceed the occupancy standard specified in Section 1125.210(c)*

The applicant **fails** on both accounts. There is no bed need here. Further, HSA1 does not exceed this occupancy standard, and Ogle county doesn't even come close. The

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current Inventory of Need Determination shows Ogle County currently at 68% occupancy. Additionally, the applicant's claims that there are projected referrals available to support this LTC facility are completely implausible & unrealistic. Those referrals are not present now anywhere in HSA1 and population estimates clearly show they won't be available in the future. Those outrageous projections should be dismissed out of hand.

Section 1125.580 Unnecessary Duplication/Maldistribution

- a) *The applicant shall document that the project will not result in an unnecessary duplication.*
- b) *The applicant shall document that the project will not result in maldistribution of services. Maldistribution exists when the identified area (within the planning area) has an excess supply of facilities, beds and services, characterized by such factors as...*
- c) *The applicant shall document that, within 24 months after project completion, the proposed project:*
 - 1) *Will not lower the utilization of other area providers below the occupancy standards specified in Section 1125.210(c); and*
 - 2) *Will not lower, to a further extent, the utilization of other area facilities that are currently (during the latest 12-month period) operating below the occupancy standards.*

This project will clearly cause an unnecessary duplication/maldistribution of services. Simply, this project is an attempt to cannibalize current providers, cherry-pick residents with higher reimbursement pay types, put current providers out of business, and leaves low income, state supported citizens of Rochelle and Ogle County with no long term care options. Those are the cold facts. This project will lower the utilization of other area providers below the occupancy standards. There is no question that this will occur. This project should not be approved.

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Section 1125.590 Staffing Availability

The applicant shall document that relevant clinical and professional staffing needs for the proposed project were considered and that staffing requirements of licensure, certification and applicable accrediting agencies can be met. In addition, the applicant shall document that necessary staffing is available by providing letters of interest from prospective staff members, completed applications for employment, or a narrative explanation of how the proposed staffing will be achieved.

The applicant's response to this requirement is perhaps the most outrageous piece of pie in the sky fiction contained in the entire application. Let's be clear here...there is not staff available in HSA1 to support another LTC. The claim that those staff are available is false on its face. They aren't. There is a staffing crisis across the health care continuum in Illinois and that fact is no secret. To claim otherwise is nonsense. The LTC providers in HSA1, Ogle County, and Rochelle face daily struggles to recruit and retain enough staff to meet our resident's needs, just as every other health care provider type in the area does. Adding another LTC into this crisis would be truly devastating for all providers of all types in the planning area.

So, why is this important? Why does Illinois have a Health Facilities Planning Act and Planning Board in the first place? What is the interest of Illinois legislators, tax payers, and citizens in this process? Simple, more than 6 in 10, or 60% of all nursing home residents in Illinois have their stay paid for by Medicaid, the State, through a federally funded, state administered program...Medicaid. Illinois pays the lowest daily rate in the nation for a Medicaid stay, and has for years. Additionally, due to decades old budgetary challenges in the state, providers often wait months, even years to be reimbursed for the care they have provided. The state has an extreme vested interest in ensuring providers will continue to operate in this challenging financial environment. The protection provided by the Health Facilities Planning Act and the CON process has been a very important factor in providers such as Petersen Health Care agreeing to care for the States most needy elderly. Removing this protection and setting this precedent will have huge ramifications all over this State. The CON protection is also critical in providers obtaining financing and lines of credit to continue to operate in this difficult financial climate. Removing this protection will send shock waves through the capital lending, financial and health care sectors of this

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State. Extreme care should be taken before the Board allows this end run around the Health Facilities Planning Act. Finally, as I stated earlier, the applicant has no interest in providing care to residents whose stay is paid for by Medicaid. That is not their business model. They attempt to attract the more lucrative Private Pay, Private Insurance, and Medicare pay types. The citizens most affected if this project is approved will be the lowest income and neediest seniors in this community. They will not have any options. Providers who care for a majority of Medicaid residents, like Petersen Health Care, need some smaller percentage of residents with more generous daily rates to be able to survive. This is no secret to the legislators and budgeters in Springfield. The state's primary reason given for Illinois paltry daily Medicaid rate is the perceived ability to "cost shift" a smaller percentage to other pay types. The theory being providers will care for the state's Medicaid population at a break even or worse rate if they can make a small margin by caring for other more lucrative pay types as well. If this project is approved and the applicant is allowed to cherry pick the residents with more lucrative pay types Petersen Health Care and others will be driven out of the marketplace. Facilities just won't be able to survive this. Leaving the poorest citizens of Rochelle and surrounding communities without any local option to provide for their long term care needs. Again, the main purpose of this Act is to provide this protection and continuity of care for the neediest of our citizens.

It's important to note, this applicant and their consultant group have led a decade long effort in Springfield to change or end this act through the legislative process. They first attempted to change the bed need formula, then they attempted to change the entire act through the installation of a "commission" to study the issue & the proposed 'bed buy, sell, transfer' boondoggle, and finally they have attempted to disband the Health Facilities Planning Act & Health Facilities Planning Board entirely. They have been soundly defeated in each of those efforts. All of their efforts to defeat this act have been based on a single faulty premise, what they describe as; *"the aging and decaying bed inventory in Illinois"*. I've heard it again and again for more than a decade. We get it, they want to build nursing homes; however, the state has a greater interest in preserving health care options for the poorest elderly in Illinois. That is why through 5 legislative sessions their efforts to kill or change the Health Facilities Planning Act have been thwarted. Now they are trying this Hail Mary approach to find a way around the will of the legislature, the industry, and the hard working providers caring for the most needy of our neighbors. So what is the main argument in their

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application to support their imaginary need? It can be found on....pg. 51 *"The issue that needs to be addressed in and around the market of Rochelle, Ogle County, Illinois is the aging, size and overall desirability of the existing health care resources serving the Rochelle nursing care market that affect quality"*. Sound familiar? *"the aging and decaying nursing home bed inventory in Illinois"*. Distinguished Board members, we have heard all this before. The legislature, the industry, the financial community, and health care providers have all soundly rejected this argument.

In conclusion, a change this profound in the Illinois long-term care marketplace should not be done through this back door approach. A decision this profound should be done with the full participation of all affected providers, the long-term care provider associations, the lending & financial community, state legislators, the Governor's office, and the resident advocate community. We implore this board not to set this bad precedent. This project should be soundly defeated. Approval of this project will have profound negative implications throughout the entire state, it does not satisfy the historic basis of this program, there is no need, there is no staff, it is an unnecessary duplication of services, and it should be unanimously and soundly defeated.

INVENTORY OF HEALTH CARE FACILITIES AND SERVICES AND NEED DETERMINATIONS
General Nursing Care

Illinois Health Facilities and Services Review Board
Illinois Department of Public Health

9/1/2017
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Summary of General Long-Term Nursing Care Beds and Need by Health Service Area				
HEALTH SERVICE AREA	EXISTING BEDS	PROJECTED BEDS NEEDED - 2020	ADDITIONAL BEDS NEEDED	EXCESS BEDS
Health Service Area 1	5926	5529	156 ?	553
Health Service Area 2	7622	6616	1	1007
Health Service Area 3	6758	5888	25	895
Health Service Area 4	7954	6426	19	1547
Health Service Area 5	6710	5808	63	965
Health Service Area 6	14100	11744	11	2367
Health Service Area 7	26893	24706	281	2468
Health Service Area 8	7938	7692	0	246
Health Service Area 9	4273	4663	399	9
Health Service Area 10	1886	1684	0	202
Health Service Area 11	4920	4384	43	579
STATE TOTALS	94980	85140	998	10838

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SECTION II – PURPOSE OF THE PROJECT, AND ALTERNATIVES – INFORMATION REQUIREMENTS Continued II

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Health Center and Rochelle Gardens Care Center, are approximately 296 and 254.9 gross square feet per bed, respectively. These two facilities are under the average gsf per bed of all facilities within a 20-mile market radius, which equates to only 349.6 gsf per bed. The area average, as well as these two local facilities, in comparison to the State Board's norm of between 435-713 gross square feet per bed, is very low. This is but one indicator of marketability that influences quality. Another indicator of marketability is the number of private rooms. According to the market study performed by LRA, each of the two Rochelle facilities only provide the minimum number of private rooms required by standard, with all remaining rooms as semi-private accommodations. Today's seniors are demanding more private rooms. In terms of quality, it is desirable to have a greater percentage of private rooms for gender, isolation, and privacy issues. In the Rochelle market there are only the two facilities, Rochelle Rehab & Health Center and Rochelle Gardens Care Center. These are the only facilities within 20 minutes travel time. One complication to the equation is the fact that, as self reported on the respective facility's 2015 IDPH Facility Profiles, 76.8% of the total patient population at these two facilities is MI (Mentally Ill); 50% and 92.3% respectively between Rochelle Rehab & Health Center and Rochelle Gardens Care Center. The facilities also report a combined 11 registered sex offenders among their total population. This is an unusually high percentage of MI and sex offenders for a small isolated rural community. It is also unusual that both facilities are owned by the same corporation, Petersen Health Network, LLC (Mark B. Petersen with 100% ownership).

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The basic need being addressed by this application is to provide General Long-Term Care and Specialized Memory Care nursing services to the residents of Rochelle in a state-of-the-art environment.

ATTACHMENT-10

SECTION II – PURPOSE OF THE PROJECT, AND ALTERNATIVES – INFORMATION REQUIREMENTS *Continued*

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Appended, as ATTACHMENT-10J, is the ownership information for the two existing Rochelle facilities as published by IDPH, Nursing Homes in Illinois.

5. Detail how the project will address or improve the previously referenced issues, as well as the population's health status and well-being.

The proposed facility, in reality, is the combination of two facilities: the first is a 70-bed General Long-Term Care facility with a concentration in rehabilitation; and the second, a 22-bed nursing facility dedicated to AD/DR care in its continuum of the disease. More than addressing the need of the entire Ogle County Planning Area, the proposed project addresses the immediate need for nursing beds just within the community of Rochelle. In Rochelle there are issues of accessibility. The market study performed by LRA and the self reported IDPH individual facility profile data in the Long-Term Care Facility Questionnaire for 2015, IDPH, Health Systems Development, document that 76.8% of the existing residents at both facilities are MI, leaving only 19 residents out of the licensed capacity of 124 nursing beds who are not MI. — Therefore, 124 beds are not readily available to the general geriatric population.

Nonsense

Appended, as ATTACHMENT-10K, are four (4) hospital letters of support stating that it is their intent to provide referrals should openings be available, and that the facility is needed. Unlike typical start-up projects it was difficult to identify referrals, as historical referrals back to the community were very limited; most chose or requested to leave the community due to the lack of choice and modern amenities. These four hospital referral sources (have pledged 25.6 monthly referrals, or 307.2 annual referrals, that can be made to the project when it is opened.) This need for services is further substantiated through the market feasibility study which analyzed several demand methodologies and market radii. Although the market study found that there is a need within the full market area (20-mile radius) of 165 beds, within a 10-mile radius the study found that even with the existing 124 beds there will still be a need for 71 more

Feasibility

ATTACHMENT-10

SECTION II – PURPOSE OF THE PROJECT, AND ALTERNATIVES – INFORMATION REQUIREMENTS Continued vi

Criterion 1125.330 – Alternatives

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1. Identify ALL of the alternatives to the proposed project:

Alternative options must include:

a. Proposing a project of greater or lesser scope and cost:

The alternatives considered for this project include maintaining the status quo, a 165-bed nursing facility, a 60-bed nursing facility, and the project as being proposed.

b. Pursuing a joint venture or similar arrangement with one or more providers or entities to meet all or a portion of the project's intended purposes; developing alternative settings to meet all or a portion of the project's intended purposes;

The Applicant made phone inquiries to Petersen Health Network, LLC to purchase one or both facilities in Rochelle for the sole purpose of building a replacement facility. There has not been a response from Petersen on this inquiry. Therefore, this item as an alternative was considered not viable.

Never
impaired

c. Utilizing other health care resources that are available to serve all or a portion of the population proposed to be served by the project; and

As previously explained, the Applicant sought to utilize one or both of the existing Rochelle nursing homes, through a purchase agreement, as an off-site replacement. The Applicant did not receive a response from Petersen Health Network, LLC on this matter. Therefore, this option as an alternative was considered not viable.

d. Provide the reasons why the chosen alternative was selected.

Although the chosen alternative was not the least costly alternative, it is the most efficient alternative which provides both General Long-Term Care and Specialized Memory Care nursing beds and is still financially and economically feasible. The current IDPH Inventory of Health Care Facilities and Services and Bed Need Determinations, effective 2015, shows excess beds in the Ogle County Planning Area (see ATTACHMENT-11A). That bed need determination uses a base year of 2013 and the

RESORT TO THESE TACTICS – ATTACHMENT-11

- 1) MARCH 2009, age of 80 yrs, Dad was admitted into a nursing home in Rockford, IL
- 2) ~~He had alzheim~~ He had alzheimer and need to be in a nursing home that offered that offered 24/7 skilled care for Alzheimer patients
- 3) Rockford was the place that offered that kind of care. It had a unit specifically dedicated to that disease.
- 4) Mom does not drive out of town, much less the interstate. She drives locally only for many years now.
- 5) At the time that Dad was admitted to the nursing home, my sister and I were working full time. My sister worked nites and I got home from the office around 6 p.m every night.
- 6) We would alternate week-ends to drive mom to see Dad. It would have been so nice for mom to see Dad on a daily basis, but it just wasn't possible. It would have been so beneficial to her on an emotional level to be able to have lunch with him and feel as if she was able to care for him in a small way. During the warmer months, I would take mom mid-week to visit Dad. Dad was in the nursing home for 3 years. He passed away in 2012.
- 7) My mom will be 87 this month. You never know what the future holds and I hope she remains in good health until she passes, but that may not happen. So, I have to think about what the future may hold for her.
- 8) If there is ever a need for her to go into a nursing home, it would be so nice to have a nice home in Rochelle so that I could see her on a daily basis. My mom and I are very close. She depends on me for various daily needs in her life.
- 9) I really hope that the type of nursing home that we are here to discuss tonight will come to fruition in Rochelle...it would be very beneficial.

Oct. 11, 2017

My name is Vivian Holt. I am 95 years old

When my husband Thurman Holt was in his early 80's, with Alzheimers, his Doctor recommended he go into a nursing home, as I was unable to care for him anymore. At that time only one facility in DeKalb, IL had an Alzheimers unit available. I had no other choice.

I didn't have a problem with that facility, other than it being out of town and made a hardship on me traveling. I had a disabled daughter living with me, and another daughter that spent the winters out of state, which caused me to visit less than I would have liked.

We must remember, we are living to be so much older now. As a usual thing one will go into the nursing home, and the other is left alone, and too old to be driving over long distances, whereas, if we have a home here visiting would be much easier.

I would love to see a beautiful facility as Liberty Village Rochelle!

Vivian O. Holt

1040 CALVIN RD

Rochelle, IL 61068

My name is Janet Holt.

My sister Carole McLvoy, and my brother Jerry McLvoy, were live long residence of Rochelle, Illinois. When they at different times had to go into a nursing home, there wasn't a room available for Carole, and there wasn't an Alzheimers Unit available for Jerry.

We had to take them to a facility out of town, which made a hardship for family and friends to visit. Although it didn't make any difference to Jerry, in his condition, being in town would have made Carole much happier.

I feel Rochelle would really benefit having a great nursing facility like Liberty Village to build here.

It would benefit patients needing their types of care, and would be so convient for family and friends!

Janet Holt
1126 Hummingbird Lane
Sewerwick, Tn. 37862

To Whom It May Concern:

As a long-time resident of Rochelle, I write to express my full support of the Liberty Village facility proposal. Rochelle is in dire need of a new skilled nursing facility that offers multiple services to local residents, especially memory care services. There are no local facilities that have the means to properly care for dementia and Alzheimer's patients. My father, a long-time resident of Rochelle, suffers from dementia. Unfortunately, my family had no viable options here in Rochelle and had no choice but to move our father into a facility that is out-of-town and further away from us. Most of the facilities in the DeKalb-Sycamore and Rockford areas that specialize in memory care had at least a 1-2 year waiting list. We ended up moving our father to a wonderful facility in LaSalle. Unfortunately, it's 45 minutes away from Rochelle. However, our priority was to find a facility that could best care for our father and his special needs as a dementia patient, and we needed to find one fast. If only we had had the option of Liberty Village in Rochelle! We would have loved having our father in town where we could visit him daily as opposed to weekends. I have no doubt our father would have loved that, too!

Although it may be too late for my father, my hope is that Liberty Village is an option for other family members, friends, and myself down the road. Knowing that these special services would be available to us in our own community would bring great peace of mind to us and, I believe, to most local residents. I hope Rochelle takes advantage of this wonderful opportunity. I only wish someone had proposed this sooner!

Dana Hughes

Rochelle, Illinois

pg. 1 of 2

My name is John Kniery, I am a Health Care Consultant working in Long-Term Care for 20 years. I also serve as President of the Not-For-Profit organization called Residential Alternatives of Illinois (RAI). RAI is the organization proposing this project.

When this company looks at a project it assesses the entire market for each level of service within the LTC continuum. In Rochelle the market contained 2 parts of the continuum of care. The first was a new modern Assisted Living facility. It was attractive enough that the proposed project is to be located adjacent to it as to compliment services creating an informal campus situation. Let me come back to this campus issue!

The second component within the LTC spectrum of services found in Rochelle are two aging Nursing Homes.

- Rochelle Gardens 74 beds 2016 Profile: 64 residents / 59 MI
- Rochelle Rehab 50 beds 2016 Profile: 36 residents / 4 MI

NO VENT CARE

These two homes are the only Nursing Homes within 16 miles / 20 minutes of the proposed site.

These two homes have 18,813 GFS and 19,800 GFS respectively, equating to an average size of 271.5 GFS/bed. This is total! Inclusive of kitchen, laundry, living, dining, bedrooms & bathrooms. Our current State Norm range provides for between 435 and 713GSF/bed. These smaller facilities are more indicative of higher number of double rooms and even 3 and 4 bed ward rooms that are just not marketable today. I would like to make one correction while on this issue. The Neighbors facility 22.6 miles and approximately 28 minutes away from the proposed project was erroneously listed with their original gross square footage. This facility also went through a CON at a time when there was not a need fully documenting the need for 30 additional private beds. That increase improves their gross square feet per bed by about 100 gross square feet or just over the lower range as set forth by the State.

This is all that there is within a 20 minute drive time.

Kinney
Pg. 1082

Residents of Rochelle deserve a more modern facility! A facility with amenities that residents not only expect but deserve. Amenities such as more private rooms, all private full bathrooms in each resident room, multiple small dining venues, state-of-the-art PT/OT department. With this proposed project, families do not have to leave the communities to visit their loved ones. To us, that is not a choice.

State wide, small, rural communities are dying. These communities are dying because they cannot keep their young people in the community, leaving parents and grandparents to care for themselves as they age. The proposed development not only addresses the community's elderly remaining independent for as long as possible but it offers young people a modern environment to work. It is not just our youth who are more and better educated, our elderly today are more educated than their parents. Today's consumers of LTC are looking for quality, not just quantity.

As described this project is unique in many ways. Typically, need is derived from an entire service area. While the market study shows that the entire market more than supports the need for additional nursing beds, what is most important from the market study is the difference in the need between 10 and 20 miles. With 10 miles the projected need, including existing inventory, is for an additional 70 beds. This assumes all beds, existing and new, are equal. This is important and unique as it shows specifically that there is a demand for additional services in Rochelle when the proposed project is expected to be complete. The project is also only proposing 70 general Long-Term Care nursing beds with the balance being for memory care / Alzheimer's beds & services.

Response if there is an issue brought up.

I would like to go back to the idea of a campus. RAI, and its related entities, are the State's largest provider of Long-Term Care within a campus setting. That does not mean RAI provides every level of care at every community. In fact, it doesn't! RAI seeks to work with and compliment existing services. If, for example, there is an existing modern Assisted Living facility, the RAI campus will provide Independent Living and Nursing Care. It is RAI's policy to get folks healthy and back to the lowest, most appropriate setting to get them back home, whether that is their house, apartment, or Assisted Living facility.

My name is Mic Brooks and I am speaking in favor of the proposed nursing home facility. 4 years ago my parents needed to move from San Gabriel assisted living as my mother's Alzheimers progressed to a point in needing a higher level of care. Meanwhile my father who has Parkinson's strong desire was to reside where my mother did.

We did not have a Rochelle choice at that time neither do we now. We needed a facility that offered specific memory care areas, staffing, and programs for her care along with a skilled nursing home wing for my father. We were forced to go out of town 30 minutes away in Mt Morris. Rochelle residents and their families deserve choice and more options for those who need long term care and updated facilities for the residents and their families.

The burdens on our family to be forced to drive at least one hour for each visit is challenging. We have a great hospital in Rochelle and would prefer to have more services locally for the continuum of care necessary as we all age. My father's Parkinson's could possibly progress and memory care services may become necessary for him down the road. We would welcome the ability to move him to Rochelle when the proposed facility becomes a reality.

I know of a number of families who now choose to care for their loved one with Alzheimers in their home. My father tried to do this for years and it takes an enormous strain for the care giver. If we had a memory care unit in Rochelle, it might be easier for the family to choose this option earlier before caregivers health and welfare deteriorates to where they feel they have no choice.

Thank you for the opportunity to speak before you today and please approve this application so Rochelle residents and their families have more choice in long term care and rehab services.



Hub City Senior Center

401 Cherry Avenue, Rochelle, IL 61068

815-562-5050 Fax: 815-561-7012

www.hubcityseniorcenter.com

October 6, 2017

**Executive
Director**
Connie
Dougherty

**Board
Members:**

Dave Eckhardt
President

Karen Hayden
**Vice-
President**

Mitch
Montgomery
Sec-Treasurer

Bobbie Colbert
Sarah
Flanagan
Fred Harner
Lori Tepinski



Dear Illinois Health Facilities Review Board:

Please consider this a letter of support for Liberty Village to construct a 92 bed nursing facility. The senior citizens of the city of Rochelle have a great need for this facility and the services it will offer including Rehabilitation, Skilled Nursing, as well as an Alzheimer's/Dementia unit.

As director of the Hub City Senior Center for the past 16 years, it's my observation that the needs of Rochelle's older adults are not currently being met within our city.

Many of the senior citizens that I have had the privilege to serve have had to travel outside of Rochelle in order to obtain the level of care that they require. It is heartbreaking for them to have to leave the community that they know and love in order to do so. It is oftentimes also very difficult for family members and friends to travel outside our community to visit their loved ones. I can speak firsthand to this hardship, not only because of the people we serve at the senior center, but also because my mother required rehabilitation after back surgery and had no choice but to travel outside of Rochelle to obtain the type of therapy she required.

I am hopefully optimistic that the Illinois Health Facilities Review Board will give their stamp of approval to make Liberty Village a viable option to Rochelle's senior citizens and their families.

Sincerely,

Connie Dougherty
Executive Director

REMEMBER-

All contributions to the Hub City Senior Center
are 501(c)(3) tax deductible.

Vicki Snyder Chura

Rochelle Township High School Rochelle Planning & Zoning Commission

vschura@rthsd212.org

- **DeKalb Co IL Population 104,362** residents age 65+ = 11.9% or ~ 12,000
- **Lee Co. IL Population 34,251** residents age 65+ = 18.5% or ~ 6,300
- **Ogle Co IL Population 51,659** residents age 65+ = 18% or ~ 9,000
- **Tri-county population over the age of 65 = 27,300**

Alzheimers.org tell us 1 in 8 people over the age of 65 in the US are affected

An epidemic status is forecast by 2050 according to reports in USA today, the Daily Mail, PBS, the Alzheimer's Reading Room, and Argentum, etc.

I am here to support licensing of Liberty Village in Rochelle.

An innovator in transportation and technology, the City of Rochelle has a chance to meet another critical a need ahead of the curve. We can keep our loved ones in the community they know & love. An additional eldercare and rehab facility will also bring new families into Rochelle. New people in the city generate revenue.

Families outside the city visiting the residents of

- Liberty Village
- San Gabriel
- Rochelle Gardens
- Rochelle Rehab and Health Care
- Lincoln Manor
- and the Countryside Village Apartments

shop in our retail stores, eat in our restaurants, visit our hospitals, use medical services and pharmacies. Those sales tax revenues support city services, local parks & schools.

The proposed facility will be adjacent to Rochelle Township High School and Lincoln Elementary School. Rochelle Township High School looks forward to working in cooperation with the Liberty Village staff to provide educational and volunteer opportunities for our high school students as it does with San Gabriel.

You will find Rochelle Township High School, the Kishwaukee Education Consortium, and Kishwaukee Community College receptive and responsive to creating curriculum and certificate programs that will train students to work in the industry.

The Greatest Generation and the Baby Boomers worked hard. They deserve the best. They deserve options. Let the market drive the competition. It will only elevate the quality of eldercare available in Rochelle.

My name is Marta Davis and I am the Administrator of Prairie Crossing Supportive Living in Shabbona IL. I have been the Administrator for almost 5 years.

We are a small Supportive living with 36 apts in Dekalb County, but just outside of Ogle County.

I feel this proposed new facility will hurt our facility as well as other already struggling facilities in the area.

We already face struggles with census and with available apartments already in the area we do not see the need for more facilities to come into the area to compete for residents. We have not been full for almost a year. We also have staffing issues. Finding good staff in healthcare is already hard and if another facility comes in and pulls from the "small pool" of healthcare workers it will be even worse.

On behalf of myself, my facility, staff and residents PLEASE do not allow this proposed project to be allowed.

Thank you for your time.

Marta Davis

- Momentum Healthcare and its facilities oppose the construction of the 92 skilled bed facility in Rochelle, IL proposed to be called Manor Court of Rochelle.
- We believe that the construction of this facility will cannibalize the nursing homes in Ogle County and its surrounding areas and will have a major negative impact on the current nursing home landscape and would negatively affect our businesses and our residents.
- Here are a few highlights of why we believe this facility should not be constructed:
 - According to the INVENTORY OF HEALTH CARE FACILITIES AND SERVICES AND NEED DETERMINATIONS, there *already* is an excess of 17 beds in Ogle County and 72 excess beds in Lee County.
 - Without going into the entire calculation of how those numbers are calculated, suffice it say, we believe the “excess” number of beds to actually be much higher.
 - The excess number of beds are based on projected population growth estimates, with a correlation to a higher number of “Planned Patient Days”.
 - In fact, the population of Ogle and Lee have DECREASED 4% and 5% respectively between 2010 and 2016.
 - Between 2013 and 2016, Ogle County saw an 8% DECREASE in census among its skilled nursing homes, and Lee County saw a 9% DECREASE.
 - The notion that adding another nursing home would “create” jobs is preposterous. All it would do is redistribute the already shortage of nurses and CNAs that we currently all are fighting for.
 - Lastly, the nursing homes in Ogle County (and the other counties for that matter) all pay Real Estate taxes. The two Petersen homes in Rochelle alone between 2011 and 2015 paid close to \$314,000 in taxes. Manor Court of Rochelle would be a non-profit and would be exempt from Real Estate taxes.
- We plan to have more information and data prepared for the next hearing on January 9th.

To Whom it may Concern,

As someone who has worked directly in the area in healthcare (SNF) marketing for the past six years I am writing to share my opposition for the development of Manor Court in Rochelle. There are several stances people are taking in this development. One would be that there are already an excess of beds that are not being utilized in the areas. In the past we saw a lot more of your standard ortho patients but now with advances in medicine, these patients are returning home quicker than ever before (and that is from the hospital). Another is the fact that this non-profit development will be exempt from Real Estate Tax which will be of no benefit to residents in the town of Rochelle.

In the marketing realm, customer service has always been a top priority for me to be able to do my job effectively. I bring this up with staffing challenges that I have seen in the past few years. In speaking with my counterparts, staffing is a wide spread issue, regardless of how many wage / benefits analysis of the area that we do. With a new development, that may cause more of a shortage with the clinical teams that we need to run a facility with a quality of care that our residents deserve. When facilities experience a staffing shortage, they have to rely on agency staffing to fill the void. We fight day in and day out to keep agency staffing out of our building for our residents. We need the consistent staffing so that we can best meet the needs of our residents, our families, by already knowing their expectations, schedules, likes, dislikes etc. With agency, we do not have this luxury as they do not know our residents as we do. Every facility in the area would have to agree with me on this as we have all experienced it at one time or another.

Also in terms of healthcare marketing, if the beds aren't full you are on the chopping block. I have see marketers filter through various positions due to census not being high enough. When the numbers aren't there, I was accustomed to calling my competitors to see if they were experiencing the same situation or if I needed to adjust the marketing plan for our facility. When they are low, we are low and with all of the options in the area, this is becoming more common.

We take pride in what we do. We compassionately care for our residents that grow into our family. In an area that has already has enough opportunity, I hope we can continue to do this for our residents for years to come and to the standards we have set for ourselves in this industry.

Sincerely,

Jen Stark
Director of Community Relations
Momentum Healthcare



OREGON
Living & Rehabilitation Center

pg. 102

October 2, 2017

Dear Colleagues:

This is an open letter in response to an application that has been submitted to the Illinois Health Facilities and Planning Board to construct a new 92-bed skilled nursing facility in the city of Rochelle in Ogle County, Illinois. If allowed to be constructed, Manor Court of Rochelle, the name of the proposed new facility, will add an additional 70 general long-term care beds, 22 special dementia-care beds, and 32 assisted living units to the already over-bedded county.

Oregon Living and Rehabilitation Center opposes the construction of the proposed new facility on the grounds that it would not only add additional unneeded beds, but would impose unwarranted financial harm to the existing healthcare facilities in the county. Data provided by both the United States Census Bureau and the Illinois Department of Health simply do not support the need for adding additional skilled nursing beds in Ogle County.

Between the years of 2010 to 2015, Ogle County has experienced a population decline of 2.5% (Towncharts Think Tank, 2017); between the years of 2010 to 2016, that population decline actually grew to 4.2% (United States Census Bureau, 2017). Only 18.0% of the total population of 51,273 for Ogle County is 65 years of age or older (United States Census Bureau, 2017); for 2016 to 2017, only 7495 households had at least one family member over the age of 60 (Suburban Stats, 2017).

Based on the Illinois Department of Health report titled "Inventory of Health Care Facilities and Services and Need Determinations" dated 13 August 2015, there were 6074 existing skilled nursing beds for Ogle County at the time, with a projected need of 5523 for 2018, resulting in an over-bedding of 680 licensed beds (Illinois Department of Health, 2015). There are almost as many licensed skilled beds as there are households with family members over the age of 60. In fact, based on the Illinois Department of Health's own statistics, Ogle County is currently overbedded by 17 beds; the construction of this new facility would result in an excess of almost 110 beds for the county.

Given the current census challenges being experienced by all the facilities in Ogle County, not to mention the ongoing challenge of finding qualified professionals to staff those facilities, the approval to allow the creation of 124 long-term care beds for the county would have an unwanted and unnecessary negative effect on all the existing long-term care providers. Oregon Living and Rehabilitation Center respectfully requests that approval to move forward with constructing Manor Court of Rochelle be denied at this time.



OREGON
Living & Rehabilitation Center

Ritter
Pg. 292

Thank you for your consideration in this matter. I sincerely hope that the correct decision is made and that approval to construct Manor Court of Rochelle is not granted.

Cordially,

Daniel R. Ritter MBA, LNHA
Administrator
Oregon Living & Rehabilitation Center
811 South 10th Street
Oregon, IL 61061
(815) 732-7994
dritter@oregonlivingandrehab.com

Pine Acres

Rehabilitation & Living Center

pg. 1 of 10

October 12, 2017

Health Facilities and Services Review Board
525 West Jefferson Street, Second Floor
Springfield, IL 62761

Dear Board Members:

As the Administrator of Pine Acres Rehab and Living Center in DeKalb, IL, I would like to state our facilities opposition to Project # 17-035-Manor Court of Rochelle. This application proposes to establish a 92-bed long term care facility in Rochelle, IL.

Although Pine Acres is not in the city of Rochelle, we are in part of the Planning Area that the Illinois Health Facilities and Services Review Board and Illinois Department of Public Health uses to determine if there is a need for additional general nursing care beds in a given county. The proposal for Project # 17-035-Manor Court of Rochelle is in our Health Service Area.

According to Inventory of Health Care Facilities and Services and Need Determinations Report of September 1, 2017, there is a net bed excess in Health Service Area 1 of 543 General Nursing Care Beds. Specifically in Ogle County, the report shows a bed excess of 16. These are projections of bed need through 2020. (See Attached)

There are already 6 skilled nursing facilities in Ogle County- 2 are in Rochelle 1 is in Oregon, 1 is in Mt. Morris, 1 in Polo and 1 in Bryon. They have a total of 565 beds. Adding another 92 beds to this service area would constitute a 16% increase to the total bed count. If there already is an excess of general nursing care beds in Ogle County as determined by the Illinois Health Facilities and Services Review Board and Illinois Department of Public Health why is there a need to add 16% more?

Rochelle Illinois is a town with an estimated population of 9227 as of July 1, 2016 according to the United States Census Bureau. Ogle County has an estimated population of 51, 273 as of July 1, 2016. Actual census reports from 2010 show a population of 9574 for Rochelle, IL and a population of 53,497 for Ogle County. There is an estimated decrease in population for Rochelle, IL of .04% between 2010 and 2016 based on this US Census Bureau and a population decrease for Ogle County of .04%. It is evident that neither Ogle County nor the city of Rochelle, IL is experiencing any population growth that would indicate need for this proposed facility.

Although I realize that the population is aging, the question is how are operators expected to recruit staff without population growth? Every skilled nursing facility in Ogle County currently has on-line ads for RN, LPN or CNA positions. Most have multiple ads for openings in various departments and positions. There are multiple ads for sign-on bonuses which are normally used to attract workers in a tight employment climate. Currently our facility has openings for 3 professional nurses and 14 certified nursing assistants. We also have openings in the housekeeping and dietary departments. It takes a great deal of manpower to staff skilled nursing facilities 24 hours a day, 365 days a year. It is hard to find qualified workers now with

Kahn
Pg. 2 of 10

the current level of competition. Adding an additional competitor will make a small workforce pool even smaller.

In conclusion, I ask that each and every member of the Health Facilities and Services Review Board vote to reject this proposal. It is not needed, based on the assessments the Board completes on an on-going bases. It is also not in the best interest of businesses that already *serve the skilled nursing needs of the service region this new facility will affect.*

Sincerely,



Dalena Kemna-Kahn
Administrator

INVENTORY OF HEALTH CARE FACILITIES AND SERVICES AND NEED DETERMINATIONS
General Nursing Care

Kahn
Pg. 3 of 10

Illinois Health Facilities and Services Review Board
Illinois Department of Public Health

9/1/2017
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INVENTORY OF HEALTH CARE FACILITIES

HEALTH
SERVICE
AREA

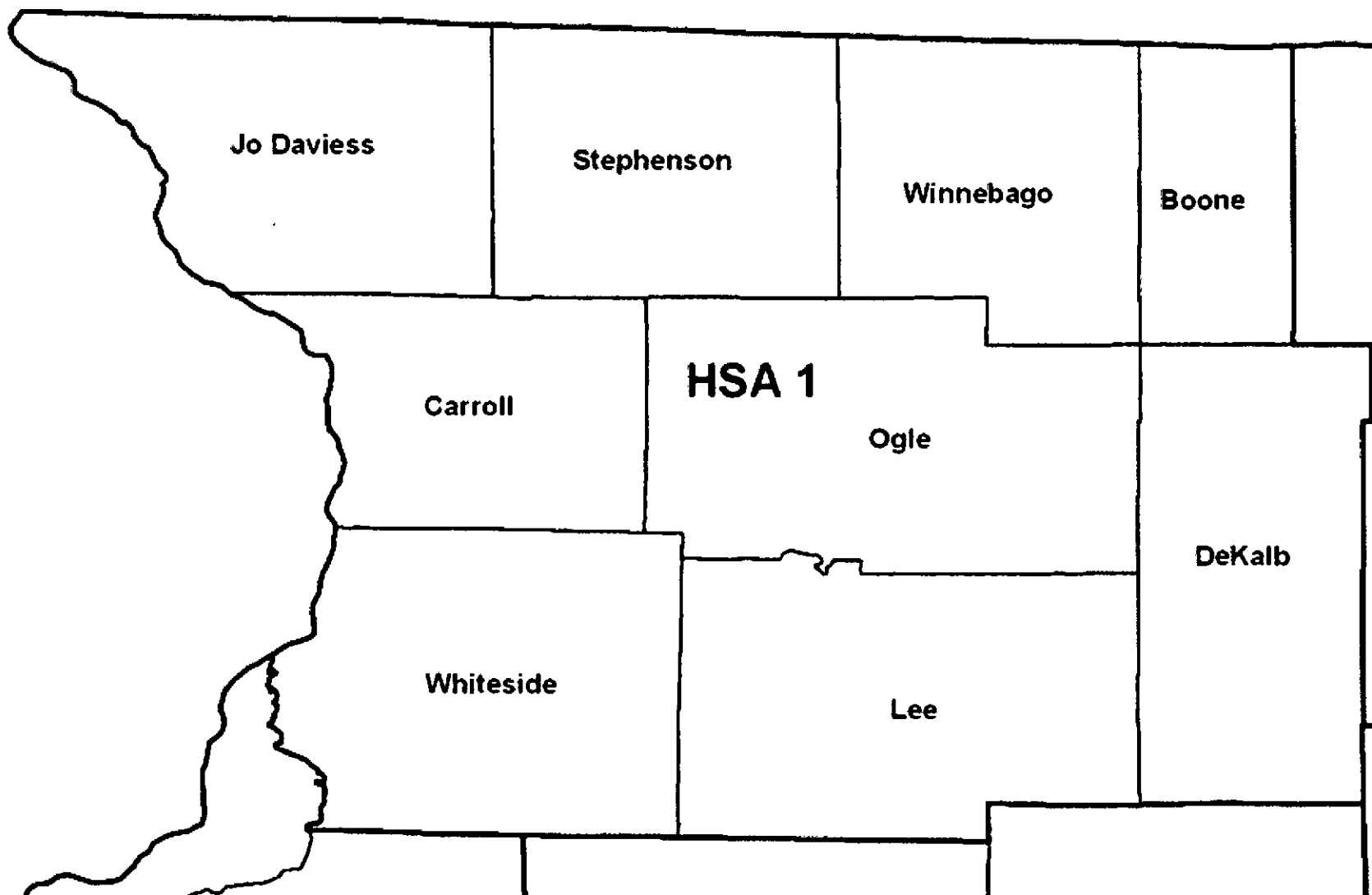
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INVENTORY OF HEALTH CARE FACILITIES AND SERVICES AND NEED DETERMINATIONS
General Nursing Care

Illinois Health Facilities and Services Review Board
Illinois Department of Public Health

9/1/2017
Page A-6

Health Service Area 1



Kulig. 4/9/10

INVENTORY OF HEALTH CARE FACILITIES AND SERVICES AND NEED DETERMINATIONS
General Nursing Care

Kahn
5/5/10

Illinois Health Facilities and Services Review Board
 Illinois Department of Public Health

9/1/2017
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Summary of General Long-Term Nursing Care Beds and Need by Planning Area				
Health Service Area 1				
PLANNING AREA	EXISTING BEDS	PROJECTED BEDS NEEDED - 2020	ADDITIONAL BEDS NEEDED	EXCESS BEDS
Boone County	279	395	116	0
Carroll County	155	157	2	0
DeKalb County	742	758	16	0
Jo Daviess County	147	174	27	0
Lee County	353	281	0	72
Ogle County	565	549	0	16
Stephenson County	646	575	0	71
Whiteside County	819	586	0	233
Winnebago County	2220	2069	0	151
HSA 1 TOTALS	5926	5544	161	704

INVENTORY OF HEALTH CARE FACILITIES AND SERVICES AND NEED DETERMINATIONS

Illinois Health Facilities and Services Review Board
Illinois Department of Public Health

General Long-Term Care Category of Service

9/1/2017

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Planning Area: Ogle			General Nursing Care									
Facility Name		City	County/Area	Beds	2015 Patient Days							
GENERATIONS AT NEIGHBORS		BYRON	Ogle County	131	26,620							
1/9/2017	14-008	Facility completed project to add 30 Nursing Care beds; facility now has 131 Nursing Care beds.										
OREGON LIVING & REHAB CENTER		OREGON	Ogle County	104	24,868							
PINECREST MANOR		MOUNT MORRIS	Ogle County	125	41,010							
POLO REHAB & HEALTHCARE		POLO	Ogle County	81	18,186							
ROCHELLE GARDENS CARE CENTER		ROCHELLE	Ogle County	74	21,967							
ROCHELLE HOSPITAL (SWING BEDS)		ROCHELLE	Ogle County	0	18							
ROCHELLE REHAB & HEALTH CARE		ROCHELLE	Ogle County	50	13,700							
Planning Area Totals				565	146,369							
HEALTH SERVICE AREA	AGE GROUPS	2015 Patient Days	2015 Population	2015 Use Rates (Per 1,000)	2015 Minimum Use Rates	2015 Maximum Use Rates						
00t	0-64 Years Old	257,637	562,500	458.0	274.8	732.8						
	65-74 Years Old	230,432	63,300	3,640.3	2,184.2	5,824.5						
	75+ Years Old	1,126,224	47,700	23,610.6	14,166.3	37,776.9						
	2015 PSA Patient Days	2015 PSA Estimated Populations	2015 PSA Use Rates (Per 1,000)	2015 HSA Minimum Use Rates	2015 HSA Maximum Use Rates	2020 PSA Planned Use Rates	2020 PSA Projected Populations	2020 PSA Planned Patient Days				
0-64 Years Old	21,210	42,500	499.1	274.8	732.8	499.1	43,400	21,659	Planned Average Daily Census	Planned Bed Need (90% Occ.)	Excess Beds	
65-74 Years Old	21,236	5,500	3,861.1	2,184.2	5,824.5	3,861.1	6,200	23,939				
75+ Years Old	103,923	3,700	28,087.3	14,166.3	37,776.9	28,087.3	4,800	134,819				
Planning Area Totals									180,417	492.9	548	17

John
pg. 60/10

AMERICAN
FactFinder

PEPANNRES

Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2016

2016 Population Estimates

Geography	April 1, 2010		Population Estimate (as of July 1)			
	Census	Estimates Base	2010	2011	2012	2013
Ogle County, Illinois	53,497	53,497	53,443	53,150	52,834	52,341

*Kuhn
Pg. 70810*

Geography**Population Estimate (as of July 1)**

Ogle County, Illinois

2014	2015	2016
52,067	51,657	51,273

Notes:

The estimates are based on the 2010 Census and reflect changes to the April 1, 2010 population due to the Count Question Resolution program and geographic program revisions. See Geographic Terms and Definitions at <http://www.census.gov/programs-surveys/popest/guidance-geographies/terms-and-definitions.html> for a list of the states that are included in each region and division. All geographic boundaries for the 2016 population estimates series except statistical area delineations are as of January 1, 2016. The Office of Management and Budget's statistical area delineations for metropolitan, micropolitan, and combined statistical areas, as well as metropolitan divisions, are those issued by that agency in July 2015. An "(X)" in the 2010 Census field indicates a locality that was formed or incorporated after the 2010 Census. Additional information on these localities can be found in the Geographic Boundary Change Notes (see <http://www.census.gov/geo/reference/boundary-changes.html>). For population estimates methodology statements, see <http://www.census.gov/programs-surveys/popest/technical-documentation/methodology.html>.

The 6,222 people in Bedford city, Virginia, which was an independent city as of the 2010 Census, are not included in the April 1, 2010 Census enumerated population presented in the county estimates. In July 2013, the legal status of Bedford changed from a city to a town and it became dependent within (or part of) Bedford County, Virginia. This population of Bedford town is now included in the April 1, 2010 estimates base and all July 1 estimates for Bedford County. Because it is no longer an independent city, Bedford town is not listed in this table. As a result, the sum of the April 1, 2010 census values for Virginia counties and independent cities does not equal the 2010 Census count for Virginia, and the sum of April 1, 2010 census values for all counties and independent cities in the United States does not equal the 2010 Census count for the United States. Substantial geographic changes to counties can be found on the Census Bureau website at <http://www.census.gov/geo/reference/county-changes.html>.

Suggested Citation:

Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2016

Source: U.S. Census Bureau, Population Division

Release Dates: For the United States, regions, divisions, states, and Puerto Rico Commonwealth, December 2016. For counties, municipios, metropolitan statistical areas, micropolitan statistical areas, metropolitan divisions, and combined statistical areas, March 2017. For cities and towns (incorporated places and minor civil divisions), May 2017.

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Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2016

2016 Population Estimates

Geography	April 1, 2010		Population Estimate (as of July 1)			
	Census	Estimates Base	2010	2011	2012	2013
Rochelle city, Illinois	9,574	9,574	9,561	9,596	9,533	9,438

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Geography	Population Estimate (as of July 1)		
	2014	2015	2016
Rochelle city, Illinois	9,386	9,309	9,227

Notes:

The estimates are based on the 2010 Census and reflect changes to the April 1, 2010 population due to the Count Question Resolution program and geographic program revisions. See Geographic Terms and Definitions at <http://www.census.gov/programs-surveys/popest/guidance-geographies/terms-and-definitions.html> for a list of the states that are included in each region and division. All geographic boundaries for the 2016 population estimates series except statistical area delineations are as of January 1, 2016. The Office of Management and Budget's statistical area delineations for metropolitan, micropolitan, and combined statistical areas, as well as metropolitan divisions, are those issued by that agency in July 2015. An "(X)" in the 2010 Census field indicates a locality that was formed or incorporated after the 2010 Census. Additional information on these localities can be found in the Geographic Boundary Change Notes (see <http://www.census.gov/geo/reference/boundary-changes.html>). For population estimates methodology statements, see <http://www.census.gov/programs-surveys/popest/technical-documentation/methodology.html>.

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